

AN IMPORTANT FACTOR IN EATING DISTURBANCES OF CHILDHOOD

BY EDITHA STERBA (DETROIT)

Among all the problems which neurotic disturbances of children present to those who have to deal with children of an early age, eating difficulties are the most important. Mothers usually have complaints about current disturbances over eating with at least one of their children. Psychological research in the feeding problems of children, if only from the standpoint of number, is one of the most important tasks for the psychotherapist of children. The localization of these difficulties points to the oral origin of eating difficulties. We assume that the oral zone, as far as its libidinal significance is concerned, reaches from the lips to the pylorus and we find in most cases of typical psychogenic eating disturbances oral instinct elements and their elaborations. An exaggerated resistance to weaning from the mother's breast, pathological reactions to the change from liquid to mashed and solid food, persistence of thumb-sucking, are typical in the anamnesis of eating disturbances. The inhibition of oral sadism which leads to the avoidance of biting and chewing, also has to be attributed to the oral source of eating disorders.

A survey of hysterical dysfunctions of eating among adults teaches us to mistrust the assumption that only oral instinct quantities are at the basis of eating difficulties. The mere fact that hysteria, an illness originating from the genital level of development, so often shows oral symptoms, indicates that instinct quantities of origins other than oral can use oral symptomatology for their expression.. Behind the mask of orality we find intensive genital wishes, chief among which is an unconscious wish for fellatio. The defense against such wishes is expressed in the form of anorexia, dysphagia, nausea and vomiting.

Since the typical eating difficulties among children reach a climax, as a rule, before the child attains the genital phase, one

might expect to find genital material in insignificant quantities. It is my observation, however, that in the typical eating problems of children too, instinctual quantities from other erogenous zones can be displaced to the oral region. The knowledge that what appears to be oral may be a displacement to the oral zone in the pregenital stage of development is of therapeutic significance in many cases of eating difficulties because, in such cases, analysis of the oral material alone yields either defective therapeutic results or none at all.

The first observation has to do with a little girl of eight and a half months, whose parents had sought my advice from the time of her birth. After a normal birth and nursing period, she had developed without any complications, was unusually strong for her age, never ill, and was a particularly good, quiet and friendly infant who, without being spoiled by too much love, was affectionate. The mother was especially happy because the baby was so easy to feed, was always ready to eat any new kind of food without fussing, had a good appetite and ate quickly whatever quantity of food she was given.

The mother, therefore, came to me at once for advice about the first feeding problem she encountered. It was quite incomprehensible to her that this child who had been easy to nurse and had changed from the breast to a bottle without the slightest fuss, who at being weaned had not shown the slightest reaction and had never missed a meal, suddenly refused to eat at all. The infant was fed in a high chair in which she had been eating very well for a month. One day, after the first three or four spoonfuls, she flung herself backwards, stiffened, and pressing her lips tightly together became red in the face and refused to take another mouthful. The food was the same as usual, the feeding time the same, and fed by the same person. The incident recurred at each successive feeding. The mother sensibly did not try to use force, but at once sought advice after two consecutive days. There was no sign of any organic illness, and as the child ate plenty of dry bread of its own accord between meals, it was certain that the refusal of food was psychogenic.

Exhaustive questioning about the child's feeding failed to give any clue. I then inquired about the child's toilet training. There had been no difficulty about this either. On the contrary, following my advice to begin toilet training late, it was only a fortnight since the mother had first put her daughter on the chamber. She understood at once what was expected of her, and after three days she was using the chamber several times daily, urinating and defæcating promptly without the slightest protest. The mother had been particularly surprised that unlike her first child, this baby did not try to stand up from the chamber or refuse to sit on it. 'Only once', said the mother, 'she flung herself backwards and stiffened, when I wanted her to sit on the chamber. But that only happened once, and then there was no further difficulty.'

Without telling the mother my assumption about a connection between the toilet training and the eating problem, I simply advised her to give up the use of the chamber for a time. She followed my advice immediately and the next day reported that the little girl was eating as before, quickly and with good appetite, all that was offered her. There was no recurrence when some months later the mother resumed the toilet training.

The mechanism operating in the eating disturbance of this little girl is clearly a displacement from the anal to the oral zone. What was displaced, however, was not a direct instinct satisfaction but a refractory defense reaction. The anal rebellion against giving out becomes at the mouth reversed to a refusal to take in. The trouble with feeding had nothing to do with the oral zone; it was a strike against the anal demand. But why is the obstinate refusal displaced to the oral zone instead of expressing itself at the point of origin in a refusal to accede to the requirements of toilet training?

We may assume that the reason for this displacement is economic. The infant is well aware that soiling the diaper worries its mother much less than a refusal to eat. The mother's manifest anxiety about a child's rejection of food gives it a powerful weapon; the refusal to use the chamber

leaves her relatively unmoved. The reaction in the child is instinctive, and certainly not due to calculated reasoning.

A second observation is of a little girl whose parents consulted me regularly from her birth for advice about her upbringing. At twenty months she was a normally developed, intelligent, strong and healthy child. Her weaning had been easy and uneventful. The child had never presented the least feeding problem. She had never had an upset stomach, never lost her appetite or vomited. At the time of the incident I am now going to describe she was able to understand everything that was said to her and could express her own thoughts in an understandable fashion.

When she was nineteen and a half months old, bowel and bladder training had been successfully completed without complications. Beginning at six months, she had been put regularly on the chamber, at first for several weeks once a day, then twice, then more often. What was expected was explained gently to her without any pressure or urging. She was praised when she complied, but no anger or indignation was shown when she wet or soiled her clothes or when she failed to use the chamber. Now always clean during the day, she often wet herself at night, would wake up and demand a 'dry diaper'. She was very proud of her accomplishment and never failed to call attention that she had done 'number one' or 'number two' and invite the parents or the nursemaid to observe and admire. She made no attempt to play with the faeces or splash in the urine, probably because she had been allowed to knead plasticine and to play with water in various games. She never refused to be placed on the chamber and performed quickly; in short, she appeared to have gone through the process of toilet training with remarkable ease and without the least feeling of guilt or anxiety when she still wet herself. Perhaps for this reason the nurse may have become insistent, since the little girl seemed to understand so well that she be consistently clean.

Approximately two weeks later eating difficulties suddenly appeared. She ate lunch with her parents, fed by her mother.

She was proud to sit with the family and always ate quickly and heartily. Suddenly she began to retain solid food in her mouth so that she accumulated a mouthful which she could neither chew nor swallow. Told to swallow, she attempted to do so, choked and vomited what she had eaten. She had never previously vomited. The retention of food in her mouth persisted unchanged without the least clue to the cause. On the fourth or fifth day after she had collected a large quantity of food in her mouth, she began to cry fearfully 'tooly, tooły', which meant in her language that she wished to have a bowel movement. Placed immediately on the chamber, she appeared to be very uneasy that her drawers would not be opened fast enough and she sat on the chamber anxiously for quite a while before her bowels moved. As she was accustomed to be put on the chamber after her noon meal and before her afternoon nap, this occurrence did not strike anyone as unusual, since they thought that this time she had merely felt the desire to sit on the chamber earlier. However, her anxious whining was entirely out of harmony with her usual happy disposition.

On the following day there was a repetition but with a minor variation. With her mouth full, she again cried out, 'tooly, tooły', began to cry fearfully and suddenly shrieked out in despair, 'It is already in my panties'. She was found to have a tiny bit of *fæces* in her drawers and was entirely beside herself about it. She begged to remain on the chamber despite all reassurance and comforting, although it was perfectly clear that she had not the least need to empty her bowel.

Small incidents were now recalled from preceding days which showed that she had not accepted the training in cleanliness without conflict. Occasionally she became fearful that she would dirty her drawers despite repeated assurances that it would not matter if she did. She stated frequently: 'Mammy is angry, when my panties are wet'; 'Daddy is angry, when my panties are wet'. When this was energetically denied, she would say, playing her last trump, 'But I angry myself, when my panties are wet'.

A new and exaggerated tidiness was now to be observed in

her. Bottles, jars and various other toilet accessories on a table were daily arranged in the same order and she watched vigilantly that this order was kept. 'No, that belongs over here', she would assert, putting the object in the proper place. She insisted that all the bottles have their stoppers replaced immediately after being used; when it was neglected, she did it at once herself.

Freely permitted to play with dirty things—digging in the coal bin for instance—she became overnight fanatically cleanly. 'My hands are all dirty', she would cry in despair when no dirt could be seen on them. She became particularly distressed whenever her hands got sticky from jam or candy. 'It is sticky', she would cry heartbrokenly, 'It is so sticky'. Once during this period her mother tried modeling plasticine with her. She deliberately made her hands very dirty and then took the child's hands in her own. The little girl drew back as if terrified: 'It is sticky', she cried, 'and it smells; it smells awfully bad'. She had been playing with plasticine for nearly a year and had never objected to its odor before.

She had clung tenaciously to a particularly beloved possession dating back to her nursing period. It was a dribbling cloth, somewhat smaller than an ordinary bib, about the size of a woman's handkerchief. Although she had been weaned at six and a half months and showed no reaction to it, after weaning as she was going to sleep, she would always demand to have the little bib that she had worn when she was being suckled at the breast. She would press this against her cheek with one hand and go to sleep contentedly sucking her thumb. At this early age she could not be fooled, and whenever an attempt was made to substitute a diaper or a handkerchief for the dribbling cloth, she became very angry. The first distinct syllable that she pronounced was a name for this cherished possession which she called her 'my-my'. At seven and a half months she would clasp it tightly and if one in fun tried to pull it away, she would protest 'my-my'—meaning 'mine, mine, it belongs to me'. This became a favorite game in which one could plainly observe the development of the feeling of possession. The 'my-my' was both her comforter and her protection

in all the difficulties and dangers of her small life. When she was vaccinated, the 'my-my' was her best soothing draught for the pain. Other children playing in the park sometimes took her toys from her. She would then cry for her 'my-my', suck her thumb a little while and be quite consoled.

During a walk her father took with her one afternoon, she suddenly asked urgently for her 'my-my'. It was given her, whereupon deliberately, with a definite aim, she threw it at once into some dirt in the street. Her father did not want to give her the dirty cloth again. She demanded it however, began to cry, which very seldom happened with her, and as soon as she got it back, immediately threw it into the dirt again. This was repeated several times, during which her little face showed clearly the desperate conflict of ambivalence raging in her.

The indissoluble struggle between wanting 'to keep' and 'to get rid of'—shown so clearly in this child's behavior—had become so intense that it became necessary to help her. The morning following the walk with her father she was found sitting in her bed playing with string beans. When she saw her mother, at once she cried out, 'tooly, too!y'. Her mother started to put her on the chamber, she objected, exhibiting the anxiety and restlessness of the day before during the game with the 'my-my'. 'You may keep back your stool as long as you like. You need not use the chamber', the mother said with emphasis. 'You may do it in your panties if you want to.' Thereupon the child jumped up happily, crying triumphantly, 'I have swallowed up the beans. They have all been swallowed.' From this moment the eating troubles disappeared entirely. She accepted, chewed, and swallowed her food with relish, but also from this time on, she wet herself throughout the day and always contrived so that directly after her afternoon nap, before anyone came to her, she defæcated in her diapers, never failing to point out, 'Already in my panties; everything is all wet'. She was put regularly on the chamber but was allowed for three weeks to wet and soil without any trace of criticism.

Some time later she began to question her mother and her

nurse about whether they too had wet panties. This was taken as an indication that the time had arrived to make demands of her again. She was told: 'Grown-ups never have wet drawers. That happens only to little babies who don't understand that clever little girls go to the toilet.' The little girl was very ambitious. She asked repeatedly that this be explained to her, and it was visibly painful for her to realize that there was something she could not understand. Within a few days she was able without fuss to remain clean the whole day, and with only an occasional exception, used the chamber regularly.

This example illustrates clearly the close interrelation between the oral and anal zones and the substitution of one for the other. This child was in the difficult position, for her, of having not only to learn to give up the content of her lower bowel, but to comply with the demand of her nurse that she should give it up at a stipulated time. This could not be done without resistance on her part, since the tendency to retain, as we have seen, was already very strongly developed in her. The conflict between giving and withholding was expressed very clearly in the game with the 'my-my' which was an oral fetish from the nursing period. The intense feeling of possession for it, bespeaks a strong anal cathexis, in this phase of development ownership and fæces being definitely connected in their psychic meaning.

Not only do anal processes come to psychological expression through the orally charged bib, but in the mouth itself a similar substitution takes place. The defiant accumulation of food in her mouth has the same value as withholding the content of her bowel. The correctness of this interpretation is shown by the fact that from the moment she was permitted to withhold fæces as long as she wished, she renounced the anal withholding of the lump of food in her mouth. It no longer served the anal substitutive function.

In these cases effective therapy depended wholly on an understanding of the displacement of anal reactions to the mouth zone.

THE RÔLE OF DETECTIVE STORIES IN A CHILD ANALYSIS

BY EDITH BUXBAUM (NEW YORK)

Detective stories are a recognized part of our literature. Both adults and children become absorbed in them and are equally impatient of interruption. For the adult they are accepted reading, but the child must often hide his stories and read them in secret. Some educators think they should prevent their pupils from reading detective stories or at least discourage it as much as possible. But experience teaches that such measures as prohibition, criticism or efforts to influence the child's judgment result merely in greater caution against detection.

When reasoning and advice both prove powerless before a child's misbehavior or habit, we may attribute to it an unconscious significance. In an article, *The Penny Dreadful*,¹ Hans Zulliger analyzed one of these adventure stories and disclosed its unconscious meaning for a boy whose favorite story it was. He found that by reading detective stories this boy was able to ward off his anxiety.

In an analysis of a young boy, I had an opportunity to study a compulsion to read detective stories.

Charles began the analysis at the age of twelve. He was a large, handsome boy with an open countenance but very reserved manner. His paternal uncle brought him to me because of severe anxiety and difficulties in learning. Charles, his mother and a sister about two years older lived with this uncle. His father had died two years previously. The mother suffered from epileptic attacks which occurred usually at night. Although he shared the bedroom with his mother, Charles was said to take no notice of them, indeed to continue sleeping.

In the first session, Charles told of his fear that a man might leap upon him from the darkness and choke or crush him. He was afraid to open his eyes for fear someone might be looking at him. In the second session it transpired that Charles' diffi-

¹ Ztschr. f. psychoanalytische Pädagogik, VII, Nos. 10-12.

culty in learning did not originate from a lack of intelligence but from a compulsion to read detective stories. He had them with him always, at home and at school, and read them instead of studying. When he tried to study he could think only about the stories. When he finished one, he seized upon the next with which he was always provided. He behaved like an addict who is afraid of going to pieces without his accustomed narcotic. They were cheap stories of the most sensational type, forbidden to public sale but nevertheless always obtainable by boys who wanted them.

Charles' hero was the detective, invincible, generous, far-seeing and clever. Naturally he had chosen the detective as his ego-ideal and wanted to be like him. Furthermore, he was fascinated by the different ways that a person could be done to death. He enjoyed the shudders that the horrors described gave him and recalled the cruel things which children do to animals. But even animals are not defenseless. He recounted a fearful tale of a teamster who had blinded both his horses and kicked them in the belly. One day they forced him against a wall and crushed him. Since Charles' starting point was the detective stories with their human actors, we were curious to know whom the unhappy and abused, yet dangerously vindictive animals represented.

In the next session Charles answered our question. He complained bitterly about his sister who teased him. She was the uncle's favorite. When he and his sister quarreled, she kicked him. He was therefore the tortured horse and she the cruel driver. He would like to have taken revenge upon her as the horse had upon the driver. He defended himself from her by interposing a chair, 'So that I would not hurt her'. It was remarkable how often she was hurt by the chair through her own clumsiness!

Since we knew of Charles' fear of being choked and crushed, we could assume that he identified himself with the victim or victim-to-be of the detective stories. His relation to his sister was the first hint that he might also be the murderer. In addition to an identification with the detective which he readily

admitted, he had other rôles. He played the murderer and victim as well.

As a token of his confidence, he next brought me a detective story. It dealt with ghosts in which Charles, of course, did not believe. But spiritualism was another matter; as for hypnotism, that was dangerous. One could get sick and even die from it. He was afraid that a man might be looking at him in the dark; that was why he kept his eyes shut. The man might hypnotize him and during hypnosis forbid him to call for help and then throttle him.

In the following session he remembered that at about the age of seven he had suffered from breathlessness and a fear of choking to death. In preparation for a tonsillectomy when he was five, his mother had told him it would not hurt, and he had not been afraid. He was angry at her for misleading him. He thought next of the death of his father who died when Charles was ten. His description of the death was rather strange and proved later to be not quite accurate. According to his version, the father 'put out his tongue and fell over'. He concluded the hour with an account of 'something odd'. He used to live on a farm where there were hogs. When the hogs had been 'cut underneath', they were not allowed to lie down. He had kept them moving and had ridden on their backs.

Charles, it proved, had looked upon the tonsillectomy as a castration such as had been performed upon the hogs, and had suffered severe pain and fear of death. In this connection Charles told of a similar traumatic experience about a year later. A dentist had extracted one of his teeth under gas. Charles had been unable to cry out or resist because of the anæsthetic which had rendered him helpless. He suspected that his father had been rendered defenseless in a similar way and then killed.

The father's death and his fear of castration were directly related in Charles' mind. He had spoken of his father in immediate association to the ghost whom he feared to see gazing at him. Later he recalled his father saying to him

during a confidential talk, 'But surely you don't do *that*, do you?' This prohibition of masturbation had caused Charles to hate his father and wish him dead. Charles added, 'Shortly after, father died'. Charles felt vaguely that his hatred and death wishes had killed his father. Fear of the ghost was moreover a fear of being discovered masturbating and of punishment in the form of castration, as well as fear of death in revenge for his father's death. In keeping his eyes tightly closed, Charles' feigning not to see was shutting out the fear-some vision of his father's ghost. The description of his father as 'falling over' suggested the probability that the epileptic attacks of the mother had a greater part in his anxiety than was apparent.

The characters in the detective stories embodied the various rôles which Charles himself played in fantasy. The victim who was taken prisoner, put in chains and drugged or poisoned was himself in the grip of the anæsthetic. Helpless and in great danger, like the pigs before castration, or his father before death, he was about to face his unknown persecutor. In Charles' fantasy, this individual was as mysterious and unknown as the villain of the stories. Every person in the story, even the detective himself, might be the murderer, and was under suspicion. Similarly, Charles was suspicious of his mother, uncle, doctor, nurse.

Following the painful memories disclosed in these sessions, there was a period of resistance. He continued to bring me detective stories, and recommended in particular Mahatewa's *Noose* which had relevance to the acuteness of his fear of being choked. This was a period of intensified anxiety and one day he stayed at home suffering from an 'attack of breathlessness'. He acceded to my request to come to the session despite his attack and told me that after accompanying a friend home, he had to go through dark and gloomy streets to return to his own house. Fearing a man might jump out from a doorway and throttle him, he had run all the way home.

Very cautiously Charles started to complain about his uncle who was strict with him and refused him permission to do

everything he enjoyed doing. He confiscated the detective stories which Charles was forced to read in secret. This was not true; the uncle had given his full permission. He complained above all that his uncle preferred his sister and sided with her in their quarrels. By contrast, he told of the uncle's taking part in his play, giving him presents and otherwise indulging him to a great extent, probably more than his father would have done.

A detective story with a menacing claw on the cover brought associations to the various ways of killing animals. He told of the great pleasure he experienced in watching the slaughter of bulls, hogs and chickens. He had never killed an animal himself from fear of its rage before it was mortally wounded.

During the Christmas holiday, in a game of 'Indians', Charles' uncle was bound by the other children. Charles did not assist in tying him up, only 'gave them the rope'. At the time he had reveled in fantasies of gagging the fettered man, rendering him defenseless and cutting off his genitals. He added, 'If you can't help yourself, you get wild with rage—so wild that you could kill anyone who is holding you.' Held against his will, anæsthetized, and having his tonsils cut out, Charles had been 'wild with rage' and wanted to retaliate. It had been his father then. After his father's death the rage was transferred to his uncle, for the uncle was in control now. The boy held his uncle responsible in fantasy both for the operation and for his father's death. In his fear of attack on the street, he was afraid that a man would throttle and kill him. What the uncle had done once he might do again. In addition, Charles feared unconsciously the revenge of his uncle and of his father's ghost for his own rage and hatred towards them. Hatred was uppermost in his every thought and feeling about them. The uncle was still more dangerous than the father because he had taken the father's place as Charles had wished to do. He felt powerless to act against him, just as he did not dare to kill animals.

The detective story provided a medium through which Charles could commit murder as well as be the victim. He

acted this out with a flashlight which he had received on Christmas. He played at flashing the light in his own eyes. He was both detective and criminal; he must watch himself to save himself from his own murderous impulses.

In the period which followed, Charles' sadistic fantasies were directed chiefly towards a schoolmate with whom he acted out some of them. From the description given, this boy was suffering from chorea. He thrashed about with his arms, grimaced and made meaningless movements, especially when he was angry. Charles justified his bad treatment of the boy on the grounds that he had stolen his fountain pen and had 'cheated and lied to him'. One day he reported that he had stuffed his muffler into the boy's mouth to gag him, and then bound him with a belt. He brought muffler and belt and a large pocket knife, suggesting that he would have liked to play the same game with me.

The resemblance to him between the epileptic mother and the choreic classmate was established. The boy's spitting was comparable with her foaming at the mouth, and the muffler with the handkerchief thrust into her mouth to prevent biting the tongue. He had, moreover, transferred his attitude towards his mother to me. Up to this time there had been no mention of his mother's attacks. At the beginning of the analysis she had been in a sanitarium for another ailment. The allusion to her illness had been general and omitted any reference to the convulsions which were not occurring at that time. Now that she was at home his associations revealed that he was familiar with the onset and the course of her attacks. He became much preoccupied with the subject, and I therefore felt justified in discussing it with him.

In the following session he gave a detailed account of another attack his mother had had. Hearing his mother's rapid breathing he thought, 'Oh, gee, it's beginning again!' Then she fell out of bed. (In the first session he had reported sleeping well except 'when the covers fell off'.) By the time he was thoroughly awake, his mother was unconscious, foaming at the mouth, her body twitching. It so terrified him that he covered

himself and pretended to be asleep. He added that he was not afraid of his mother, but he had been afraid of a beggar whom he had seen in an epileptic attack. No one had ever talked with him about what ailed his mother. A little later he vouchsafed that he had been most afraid that the beggar would fall on him or leap at him, carrying him to the ground when he fell. His current dreams expressed fear of being pursued and of falling: he was for instance running through a forest, chased by someone and he fell into a pit.

His fear of falling included a fear of catching or of inheriting his mother's sickness. But chiefly the fear of falling was the feeling of persecution by the father-uncle-surgeon, and by his mother who had deceived him about the operation, had held him, 'threw herself on me' as he said, so that he could not defend himself. Describing his impression of the anæsthesia he had said, 'Women [his mother and the nurse] overpowered me'. The charges he made against the schoolmate of lying, deceiving and stealing from him—of these, he directly accused his mother.

In the game of 'Indians' he had not taken an active part but only provided the ropes to bind his uncle. In his acting out with the schoolmate, he did gag and fetter the boy, which he had not dared to do to his uncle. The choreic boy and the epileptic beggar were in his fantasy both males afflicted with the dangerous 'falling sickness' of his mother. Thus we see that Charles' 'persecutor' was a combination of his mother and the uncle who was also the displaced father. If this persecutor should attack him, Charles, like his mother, would fall down, and be castrated, become a woman. Charles would prefer to overthrow the man. In terms of his detective stories, he would have preferred to be the murderer rather than the victim. His play with the flashlight confirms this interpretation.

The measures taken to relieve the mother during an attack all represented violence to Charles. According to his fantasies acted out with his classmate, the handkerchief put into her mouth was a form of restraint. When the doctor came he gave her an injection which according to Charles, 'paralyzed' her, and he did something else which Charles could not explain.

In the next session, Charles spoke of some moving pictures he had seen of the capture of Andreas Hofer, of a fight between a boa and a crocodile in which the crocodile's back had been broken, of a gorilla's attack on a man. He recounted the horrors which occur in such struggles, of being made deaf and blind and speechless, of losing arms and legs, and of breaking one's nose. To be protected against these atrocities, one must be stronger than the uncle who, in Charles' fantasy, was the strongest of all because he had done away with his father and substituted himself.

From his associations one could reconstruct what strongly suggested memories of a primal scene revived by the mother's nocturnal convulsions, a primal scene of which he had been a frightened and passive witness. In his unconscious fantasy, his father's participation had resulted in his father's death. As a detective or a witness he must try to protect the persecuted mother, and at the same time protect himself from her and the uncle. He must be able to overcome his uncle as he, in Charles' fantasy, had overcome his mother and his father. He read detective stories to find out how to protect himself from this danger. He was distressed by those stories which turned out badly because they failed their purpose of allaying his anxiety; rather they increased it.

After the relationship between the fear of the persecutor and the illness of his mother had been established, Charles' urgent need to read detective stories ceased except in periods of great resistance or increased anxiety when he would seize upon them again. He was outspokenly dissatisfied with them and finally rejected them as stupid and foolish—always the same and always untrue.

The analysis of the detective stories covered a period of six months and was divided into three phases. In the first Charles was identified with the victim, the manifest content of his fear. In the second he was the criminal, his aggression directed towards his sister, his mother and his uncle who also represented his father. He was fearful of the vengeance of his victims

and of the consequence of his aggressive wishes which would entail castration as a punishment. But the figure which caused him greater anxiety was the epileptic: mother, beggar and class-mate. Here it was plain that his aggression was a defense against his own passive wishes to be overcome and castrated. In the deeper levels of his passive homosexual wish, fear had the function of protecting him from his instinctual drives, both aggressive and passive, which would result in his castration. Aggression would be punished by castration and passivity entailed castration as its condition.

Identification with the detective served the same function as the fear. It protected the victim and hindered the criminal from carrying out his evil designs. Therefore the identification with the detective temporarily did away with the need to fear. This identification, in contrast to his identification with the victim and the criminal, is not easily recognizable in the analytic material except that in all its phases Charles was consciously identified with the detective. This was the only rôle acceptable to his ego. The analysis disclosed which forbidden instinctual desires the detective had been installed to combat, and the impulse gratifications he had to prevent. While the detective served in the defense against the instincts, the criminal and the victim were in the service of wish fulfilment. This two-sidedness reminds us of the structure of the neurotic symptom which likewise serves as instinct defense and instinct gratification. In addition, it serves the function of allaying anxiety. Since the detective stories fulfilled these conditions, they were symptoms and as such were held on to compulsively.

The analysis of Charles' compulsion for detective stories agrees with Zulliger's analysis, in that here also the stories are a form of defense against fear.

Translation through the courtesy of DR. EDITH B. JACKSON

ON THE POSSIBLE OCCURRENCE OF A DREAM IN AN EIGHT-MONTH-OLD INFANT

BY MILTON H. ERICKSON (ELOISE, MICHIGAN)

The age at which dreams first play a part in the psychic life of the individual is unknown. Various careful studies have reported that dreams may occur even before the development of speech, but the weight of evidence has been inferential in character and based upon sleep disturbances for which purely physiological, as distinct from psychic, activity might as readily be postulated. With the development of speech, however, definite evidence of dreaming by very young children is obtained, their utterances while asleep disclosing their sleep disturbances to have an unmistakable psychic content, as is shown so clearly in Grotjahn's recent observations of dreaming in a two-year-four-month-old baby.¹

Pertinent to these considerations is the following brief note reporting an instance in detail which suggests strongly that a dream with definite psychic and affective content may occur even at the early age of eight months. The attendant circumstances are given in full since they suggest a possible background for the development of affective desires which might in turn give rise to dream activity.

For a period of months a father was in the habit of playing with his infant daughter regularly just previous to her six p. m. feeding and much pleasure was taken in inducing her to laugh and in watching her extend her legs, flex her arms over her chest and turn her head from side to side as she laughed. The infant had developed a definite attitude of expectation for this specific play activity.

When she was exactly eight months old, external circumstances caused the father to be absent from home one evening and the next. Returning at midnight the second evening, he paused at her bedroom door. He could see her clearly out-

¹ Grotjahn, Martin: *Dream Observations in a Two-Year-Four-Month-Old Baby*. This QUARTERLY, VII, 1938, pp. 507-513.

lined in the moonlight, lying quietly in her crib, breathing deeply and sleeping soundly. As he was about to turn away, she moved restlessly, extended her legs, flexed her arms over her chest, turned her head from side to side, laughed merrily, took another breath and laughed again. This was followed by general relaxation and a continuance of the deep, quiet breathing, nor did she arouse when her father entered, but continued to sleep as he tucked her more securely under the covers.

To say that an infant of eight months could have a dream of definite psychic content and with affective components seems questionable, but even more questionable would be any attempt to postulate a physical discomfort which would disturb sleep and result, at that age, in an expression by laughter. Likewise questionable would be any attempt to draw conclusions about so young a child experiencing affective deprivation so strongly that resort would be had to a dream satisfaction. Yet, in this instance such an inference seems plausible. In any event, the observation is noteworthy in relationship to the problem of dream life and it is hoped that other observers may report similar instances.

Since making this original observation, another of similar character has been made.

As they were returning late one night, the parents heard the baby, then thirteen months old, laughing merrily. Entering her bedroom immediately, they found the child apparently sound asleep. Before they had an opportunity to touch her, however, the child again laughed merrily and this laughter was immediately succeeded by a third peal, following which the infant continued to sleep so soundly that even the changing of her diaper did not arouse her.

That this type of behavior occurred in relation to a pleasing psychic content or experience on the order of a dream seems to be a reasonably plausible and legitimate inference.

At the age of twenty-three months, this same child became much concerned over a rather extensive abrasion of the knee suffered by her older sister as a result of a fall on the pave-

ment—an accident discussed by all of the children in the family and their playmates. Several nights later, after she had been sleeping about three hours, she suddenly began to cry. Upon being picked up, still crying, she sobbed, 'Po' Kaka (Carol). Kaka bad bump. Kaka hurt. Kaka cry.' Efforts to reassure her verbally failed, as did an attempt to show her that Carol was sleeping quietly. She continued crying, adding, 'Kaka fall down. Kaka hurt knee.' She seemed still to be asleep and unresponsive to all reassurances. Accordingly she was aroused completely. Thereupon she repeated her remarks, but with much less grief in her voice and she seemed to be very greatly bewildered and puzzled by the sight of Carol sleeping quietly in bed, as if she could not reconcile a dream content with the actual sight of her sleeping sister. She then proceeded to discuss the matter and the impression derived from her fragmentary remarks was that she was trying hard to explain the situation to her parents. Following this, she returned readily to bed and slept comfortably the rest of the night. In this instance there can be no doubt of the occurrence of an actual dream based upon a previous experience.

A CHILD TALKS ABOUT PICTURES

Observations About the Integration of Fantasy Into the Process of Thinking

BY MARTIN GROTJAHN (CHICAGO)

Tommy, a child of five and a half, was three years old when he started to look at magazines. As with many other things at that time of his life, it was an imitation of his father who read magazines. Tommy looked at pictures with apparent pleasure and with a feeling of doing something important. At first he looked at pictures he could understand with no more nor less interest than at pictures which could not mean a thing to him; for instance pictures of cities, landscapes, machines, advertisements or printed text without illustration. He looked patiently and earnestly at them without communicating what he saw or felt — simply enjoying a happy union with his father who seemingly did the same. Occasionally, however, he uttered some words about what he saw, speaking more to himself than to anyone else. The remarks he made it is believed give some insight into how a child in a quasi-experimental situation experienced reality. The situation is relatively uncomplicated because with a given picture which a child sees directly, the objective background of his reality experience is known.

Tommy's interest in pictures cannot be explained on the basis of imitation only—at least not by imitation of the father's reading — but more by identification with the father and his methods of seeing, learning, experiencing and gathering knowledge which the boy tried to claim for himself. The driving motive behind this interest was the wish to take the father's place. The purpose in presenting these observations is not to analyze this boy's *œdipus complex*, but the description of the way in which he worked out some problems he was facing.

Institute for Psychoanalysis, Chicago, Illinois.

I

Tommy was kneeling on the floor in front of a couch on which his father was reading a magazine. Before him on the floor was a large picture magazine. He turned the pages slowly and solemnly, looking long and intently at each of them. Surprisingly enough, he was observed repeatedly to make deep bows to pictures representing people. Kneeling closer, he made as if to lie at the side of the person pictured. He was next deeply fascinated by a whole page picture of a man who was walking along a sidewalk. Again Tommy made his bow, looked closely at the man, nodded his head at him and remarked, 'Yes, you are taller than I'. This was stated in a simple, somewhat resigned, matter-of-fact voice. A problem seemed to be solved and he turned to other play.

Another time he was found looking at a colored reproduction of Gustave Courbet's *Woman With A Parrot*, examining the nude woman lying on her back with the objective eye of an art expert. Suddenly he seemed to recognize her. 'Mother?' he questioned. He turned the picture in order to have a better view of her features. Query yielded to certainty: it was Mother. He looked relieved. Having decided it was Mother, things were right.

The same tendency to solve the problem of a picture by introducing something real and well-known into the unknown could be observed at different times. For instance, he saw pictures of the same man (Pope Pius XII) over and over again in the same magazine — always in different situations, but always the same face: a slight exophthalmus, the eyes bright behind heavy glasses, a direct and penetrating look straight out of the picture into the eyes of the onlooker. 'What is Uncle looking at?' Tommy asked the Pope. The picture did not reply so fantasy supplied the answer: 'He is looking at Mother in the bathtub'.

A most puzzling picture found an equally surprising solution. The text beneath it describes the picture; it reads: 'The Witch kneels beside the skull and plunges an ice pick into the photograph of an unfaithful lover'. He first tried giving the

witch a name, choosing the name of one of his girl friends: 'Judy—why does Judy cry? What is Judy doing?' He found no answer to this question—it was an unsolvable problem. After some hesitation, the solution came unexpectedly with a singsong: 'Judy More, second floor'. This does not make much sense; however it transforms the picture into something familiar. Making a little song of it seems an additional reassurance and he is content.

The choice of a child—quite unessential to the content—when he has difficulty with a picture is a favorite device of Tommy. In a cartoon a dinner table is drawn in the foreground; two gentlemen stand in an open door. 'Uncles go home', says Tommy. Then he discovers a little dog obscure in a corner. 'Doggy doesn't go home; Doggy stays for dinner.' It transpires that the two gentlemen brought the dog to a nursery school for dinner.

Some pictures he brings to his father and demands explanations. About ducks flying in a beautiful naturalistic color painting, he asked, 'Where are they going? I can't see it!'. He insisted upon an answer, and was satisfied with the statement that they were on the way to Topeka.

Sexual fantasy finds expression in magazine picture interpretation, but mostly as confirmation, for already established theories. So, in a picture of two little pigs kissing each other, he observes to his great enjoyment that they do it with their snouts. Mistaking the snouts for what they represent to him, he says: 'Look, they kiss with the peepee!'

He was troubled about one picture. He was not fearful or anxious, but had a worried look and was restless. It was a worm's-eye-view of a girl on ice skates, chiefly the two legs and the crotch framed by the flaring of the short, full, skirt. No part of the girl's body above the waist was visible. He said nothing but during the day he returned again and again to the magazine, turning the pages looking for this picture, and then putting it away again. Finally he made his diagnosis: 'The aunt is broken off above'. He became quite ecstatic when he found another 'broken off' lady in another magazine:

a ballet girl kneeling with the ballet skirt spread out so that only the head, chest and arms were visible. This was an aunt with her stomach broken off.

The pleasure which Tommy gets from picture books for children is very different. They are enjoyed as a means of talking with Mother rather than as a means of investigation. But at three years of age he was abandoning picture books for medical trade magazines, road maps, and vacation prospectuses.

When sick he cuts out pictures, uses them as 'friends' but never regards them as real objects. Once he gave a clipping of the quintuplets to a lady who had been speaking of her childlessness with the remark, 'I got some friends for you'.

Making pictures has very little in common with seeing pictures. Tommy strongly prefers surrealistic drawings. Most of them do not mean a thing, do not have a name and the question, 'What is that?' is meaningless for him. His usual answer is, 'It is a picture'. Some of them are called just 'Light' or 'Green' or 'Blue', no matter what the color used. To call colors by their right names is a guessing game for him which seldom and only by coincidence fits with reality. He may have a blue pencil in his hand and say 'green' or 'red'. He likes to draw movement. One picture is called, 'Way into the Bathroom' or 'Me Walks'. Sometimes he makes drawings of 'Mother's Big Feet'. This remark was made during the period when he was worried about the difference between boys and girls.

At three and a half years of age he began to draw pictures of people, a sack with a mouth. He pictures himself very seldom. Probably he does not think it possible for him to appear on paper and be himself at the same time. Some of his images have a little leg, like a baby, and two or three big legs, 'Father's legs'.

These remarks originated at the time when at three and a half years of age Tommy had begun to have an intense sexual curiosity. He had more than once seen a little girl friend bathed, but for the first time he commented about the genital difference. Despite detailed explanations, he asserted that little

girls have a little penis. No one argued with him; he was simply given the facts and he was left to draw his own conclusions. It took him six months or longer to accept the facts. After he agreed tentatively that girls have no penis, he asked repeatedly when he, Tommy, was going to be a girl; when girls change to boys and how it is done. He was finally convinced that sex cannot and should not be changed, but he made one exception: for a long time he continued to believe that his mother had a penis. The opportunity to observe a pregnancy and see the baby helped to solve this problem for him. He was four and a half and knowing that 'the father makes the money, the mother the baby' satisfied him. He would become a farmer and marry his girl friend when he grew up. Before that he would learn something in school and in the process decided to marry three or four of his boy friends. In his mind marriage was synonymous with friendship.

After everything seemed to have been settled to everyone's satisfaction, he was shown the same pictures he had made comments about a year before when he was three and a half. He now correctly described the 'aunt who is broken off above' as a 'girl on ice skates'. This, interestingly enough, was the only picture he remembered as having seen before. The 'aunt broken off below', the girl with the ballet dress, was a 'girl fallen in the water', a mistake which is easily understandable if one sees the picture.

He immediately recognized the ducks as flying ducks. On the question where they were going, he replied after some consideration, 'the big ducks [in the foreground] fly to the little ducks [in the background]'. The mysterious picture of the witch still did not make any sense. He put this picture quickly aside with the remark that it was disgusting. The picture of the nude woman stimulated the following comments: 'She is lying there naked. Hey, papa, I told you about the ducks, now you tell me what does the bird want? Does he want something to eat? What does she tell him?' He was much more interested in the parrot in the picture than in the nude woman, which had engaged his attention the first time.

With increasing ability to understand the content and the story of the pictures, he lost his pleasure and his interest in them. He turned more and more from magazines to comic strips and funny books which will probably remain in the foreground of his interest for quite awhile to come.

II

What impresses us in this child's behavior is the courage, the open-mindedness and the originality with which he tries to conquer the unknown. At first it was the simple trick of replacing something unknown with something familiar, and this was not limited to his interpretations of pictures. Once his little boat sank under the water and his father remarked that it now behaved like a submarine. Since then he has called the boat 'sub-Mary', a variation of his best girl friend's name, Marie. This sovereign use of words converted the meaningless 'valentine' to 'valentine'—like Christmas time.

Such solutions temporarily settle problems for the child. Whether like Freud, we call this bright intelligence in contrast to the stupidity of the average adult, or like Therese Benedek, we see in it a result of the child's confidence, or whether with William James and Carl Gross, we explain it as functional pleasure, or like Fenichel, as a 'counterphobic' attitude, does not make much difference. It has something closely related to 'working through'. The solution is obtained in a rather artistic, narcissistic way, much like the solution of a problem in a dream. The child is courageously persistent and doggedly returns to the problem until some kind of a satisfactory solution is obtained.

The healthy, unspoiled and unneurotic child is by no means free from fear. It is also not free from anxious attitudes about the unknown. But the healthy child is not sufficiently afraid of its fears to be deterred in its quest for knowledge and mastery of its environment. Its fear does not inhibit its activity as long as it does not feel unloved and lost or opposed by a hostile world of adults. The adult world is not necessarily so threatening for a child as it may seem to the adult who tries to identify himself with the baby. The child who loves and

is genuinely loved by its mother and its father will also love the persons like father and mother and so the rest of the world. So long as it loves them it will continue to try 'to be big like you tomorrow'. If a child does not have its confidence shaken, it has a nearly unlimited reserve of confidence and firmly believes that human beings are essentially good. In one of his favorite games Tommy once displayed a striking example of this. He took his gun, 'killed' Hitler, and then pretended to push the dead image into the basement. He continued this game until he had 'killed' many Hitlers. Finally he stopped and as if looking at another Hitler he announced: 'This is a good Hitler. He likes you and he likes me. He is the nice Hitler. He is my friend.' He could not accept the idea of an absolutely bad Hitler; it might have aroused anxiety in him. There must be something good in everyone. Hitler represents in Tommy's unconscious the 'bad' father — but still the father and therefore never absolutely bad.

Comparison of the courageous child with a timid child shows the difference in the management of the same fear. The courageous child is happy, gets great pleasure from his activity and is filled with a joy of living. The timid and at the same time the masochistic child cannot master his aggressiveness because his courage is broken by guilt feelings. The courageous child may be quite aggressive without guilt, as when Tommy told his father: 'Don't talk now. You are dead'; and at another time: 'I kill you and put you in a museum'.

Tommy in his happy confidence in his power could see no reason why if his father could swim, he could not. So he simply assumed that he could swim too, exactly as he thought he could drive an automobile if only he were given a chance. Only slowly did he come to realize that there were obstacles. In this respect he behaved very much like a dreamer who solves the conflict in a dream by wish fulfilment and thus insures a continuation of sleep. The child solves its reality problem by introducing the known into the unknown and tries in this way to establish superiority and mastery.

It may be objected that new achievements would become impossible because the child strives always to rediscover some-

thing already known. However the introduction of the known into a new psychological field often changes the known into something startlingly new, giving rise to the impression of an original creation, as for instance in the combinations 'sub-Mary' and 'valentine'.

Similarly, new creations through combination of known and unknown facts may be observed in the child's everyday play. A child who gets a new toy today will use it tomorrow in a new situation with surprisingly different results. The scooter of yesterday becomes a fire engine or a boat tomorrow. The child not only plays with a toy, but the toy plays as well with the child. The child uses the toy at the starting point of free associations and the toy — if it is a good one — stimulates the child's associations and fantasy.

The child's relation to objects is one-sided. It does not consider the object's individual existence. It assumes, as Alice Balint pointed out, a preambivalent attitude. In this stage of early development love and hate are not separated. The small child feels in a happy union with its mother and with its environment between which it does not differentiate. Before birth, the child and its mother are one. At the beginning of life everything which is known belongs to the early union of child and mother, everything else being unknown. Therese Benedek correctly states that the child with undisturbed confidence in its mother will courageously investigate the unknown. The happy union of mother and child is a reality in early childhood which coincides with its belief in its omnipotence. This childish belief is lost when the individuality of objects and the laws of reality are discovered. The courage of the child to investigate the unknown is probably based upon the desire to dominate, to incorporate objects and thus to restore its omnipotence.

The child's attitude and behavior is like that of the traumatic neurotic who repeatedly enacts the traumatic situation in his dreams and symptoms. Each has to prove that there is nothing which may threaten his narcissistic omnipotence. The unfinished job, and in this case the traumatic experience, is in itself a narcissistic blow. They may also be compared with an

emigrant. Change of environment, economic and emotional dependence, inability to understand the language and to make oneself understood, are all traumatic experiences.

The child so to speak, 'works through by acting out'. Putting its uncomplicated courage into its actions, it gradually combines the pleasure principle with the reality principle. The attempted solution is far removed from reality and consciousness. Similar conditions make the therapeutic value of acting out in psychoanalytic patients so doubtful. Acting out replaces the working through which is the analogue of acting out on the ego level (Freud). Working through as a part of therapeutic analysis is a process of ego strengthening. It is placing the forces deriving from the id at the disposal of the ego — which is exactly what the child is doing.

The adult would be happier if he could preserve something of the child in himself, namely, the child's courageous tenacity which as a matter of fact comes close to the attitude of the true scientist: both are open-mindedly ready for surprise and ready to revise their conclusions.

In Thomas M. French's study of the process of learning which he calls 'the central function of the ego during childhood', he demonstrates the interrelation of fantasy and thinking, and the essential function of the ego, as integration and synthesis. The use of fantasies as described in these cases is, according to French, 'a normal phase in the development of the infantile ego'.

I believe that the modified use of fantasies is neither limited to the process of learning during childhood nor limited to the infantile ego. The ego continues to learn so long as it is young and it may remain young even after it gains maturity. The child uses his fantasy in order to conquer reality little by little. The neurotic uses his fantasy as an 'emergency defense' (French) against the recognition of painful reality. The neurotic has in common with the child the use, or better the abuse, of fantasy, but this use serves as a defense and not as an attempt at working through.

Compared with the infantile ego, the mature ego may be

defined as the ego which succeeds in the integration of the reality principle and the adjustment of the instinctive needs towards it. The mature ego is a living and constantly changing entity with a certain fluctuability dependent upon changes of reality and possible changes in the biological needs of the person. This adaptability and flexibility of the ego is one of its significant features.

The id by contrast is relatively unchangeable, timeless, and conditioned mainly by inherited and other biological factors. The ego does not necessarily need to become rigid and inflexible in old age. It is possible to keep the child in oneself alive, to learn and to change until the end of life. The ideal aim of ego development seems to be expressed in what Goethe probably meant by the words: '*Verweile Augenblick, Du bist so schön*'. I shall not attempt to translate Goethe's words into psychanalytic terms. They indicate more than satisfaction, even more than saturation. They indicate happiness beyond ambivalence, a harmony of the individual within himself in his relation to the cosmos, very similar to the early relation between mother and child. The task of integration would then be completed.

REFERENCES

1. BALINT, ALICE: *Mutterliebe und Liebe zur Mutter*. Int. Ztschr. Psa. Imago, XXIV, 1939, p. 33.
2. BENEDEK, THERESE: *Adaptation to Reality in Early Infancy*. This QUARTERLY, VII, 1938, p. 200.
3. FENICHEL, OTTO: *The Counter-Phobic Attitude*. Int. J. Ps., XX, 1939, p. 263.
4. FERENCZI, SANDOR: *Entwicklungsstufen des Wirklichkeitssinnes*. Int. Ztschr. Ps., I, 1913, p. 124.
5. FRENCH, THOMAS M.: *Defense and Synthesis in the Function of the Ego*. This QUARTERLY, VII, 1938, p. 537.
6. ———: *A Clinical Study of Learning in the Course of a Psychoanalytic Treatment*. This QUARTERLY, V, 1936, p. 148.
7. FREUD: *Recollection, Repetition and Working Through*. Coll. Papers, II.
8. GROTJAHN, MARTIN: *Dream-Observations in a Two-Year-Four-Month-Old Baby*. This QUARTERLY, VII, 1938, p. 507.
9. ——— and FRENCH, THOMAS M.: *Akinesia after Ventriculography*. This QUARTERLY, VII, 1938, p. 319.
10. STERBA, RICHARD: *The Significance of Theatrical Performance*. This QUARTERLY, VIII, 1939, p. 335.
11. WILSON, GEORGE W.: *A Prophetic Dream of Abraham Lincoln*. Amer. Imago, I, 1940, p. 42.

A CHILD ANALYSIS

AGNES B. GREIG (WASHINGTON, D. C.)

When first seen Alan was nine years and three months old and presented the following picture: a large, fat, slow moving child, with white face, tragic staring eyes, heavy scowl, clenched jaw, his whole body rigid and with the abdomen protruding strikingly. He sidled into the room hugging the walls taking first a step forward and then one backward, watching me warily. He sat stiffly on the edge of a chair, his right hand tightly clenched in his pocket and with the left arm he made rhythmical pushing away movements. He never once removed his terrified eyes from my face.

The history was obtained from parents and the family physician. Alan was a healthy, happy baby. He was breast fed ten months and presented no problems until when he was eighteen months old the maternal grandmother came to live with the family until her death six months later. She was an invalid requiring much care. The family being in very limited circumstances the mother carried the entire household duties unaided. Alan promptly showed his disapproval of the consequent neglect by making many demands which his mother had no time to meet and he soon changed from a happy child easily cared for to a restless, unhappy one.

At the age of two years, shortly after his grandmother's death, he fell and cut his forehead. It bled profusely and in alarm his mother picked him up and rushed him to a doctor. There he was held by his mother and the doctor's wife kicking and screaming on a table while several stitches were put in. A few days later he began blinking, scratching his face, twitching and shrugging. In the hope of relieving these symptoms a tonsillectomy was performed two months later, but this made him worse. For several months sun lamp treatment, outdoor activity, changes in diet and other measures were tried but the condition grew worse and his sleep became greatly disturbed. He was in a constant state of excitement and motor activity.

A diagnosis of chorea was made at the age of three, and he was kept in bed twenty-two hours a day and given sedatives in sufficient amount to reduce the muscular twitching and produce sleep. At the age of seven he was still spending the entire afternoon in bed. He was not permitted to play with children and no company was invited to the house for fear of exciting him. His mother was his sole companion.

As soon as he was sent to school he began having a series of acute illnesses and accidents, all characterized by high temperature and much general disturbance. Before and after these illnesses the choreaform movements increased. Sedatives never completely stopped the abnormal movements but very considerably diminished them, and until the analysis was begun he was never more than a few weeks without this medication.

The movements were jerkings and twitchings of the whole body, and pushing away movements with the arms which caused much trouble because of striking people or objects which happened to be in the way. He had to pass people on the right side 'to prevent being tangled up'. As it was frequently necessary to push people away from walls or furniture to accomplish this it was a source of great annoyance. He was compelled to return by the identical route he had taken, and for his mother whom he did not permit to leave him for an instant, the most ordinary household errands were complicated problems. Another compulsion was that the left sock and shoe must be put on first. He often hopped on the right foot, grunted and nodded his head. He grimaced a good deal and went through complicated movements 'to make things even'. He was fearful of all noises, especially of fire alarms. On two occasions, as a result, he came home from school with a severe chill followed by high fever and vomiting. He ran upstairs when the telephone rang and was terrified of the doorbell. He was very fearful of dogs. He never played and seemed afraid of children. At school he never left the teacher's side until his mother came for him. He learned to read very rapidly but did no other work. He became very angry whenever he read anything which was not factual. He scowled and

appeared to be perpetually angry. From the onset of the chorea, he showed no affection for anyone, no real interest in anything but books. When spoken to he appeared not to hear or else answered very rudely. For a few months he had been getting slower in all his movements. Unless his mother started him doing something he would sit and stare for hours. He ate voraciously and was much upset if kept waiting for meals.

The parents were pleasant and sociable, but conventional and very limited in experience and outlook. Only their desperation made them even consider an analysis for the child. At the beginning of analysis the mother, exhausted by the long years of heavy strain, was tight-lipped and hostile, inhibited in movement and speech. However she quickly responded to sustained friendliness and throughout the analysis an effort was made to prevent her feeling shut out and to win her confidence. She proved to be intelligent, had a delightful sense of humor and by the end of the analysis looked younger and happier, and had developed several satisfactory outside interests. The father on the contrary, although perturbed about the boy had seemed self-assured and stable, but as time went on showed increasing anxiety, aged markedly and during the latter part of the analysis had several illnesses.

At the first visit Alan made no spontaneous remarks, and only brief or monosyllabic replies. A quiet acceptance of his terror was perhaps a little reassuring and in reply to a question he said he was in such constant dread of the fire alarm he could think of nothing else. The purpose and method of analysis was explained and a few simple illustrations of association given. He showed a little excitement and, asked if he thought he would like it, replied 'Yes'. During the early visits his speech was very stilted and whenever he made a grammatical error he looked fearfully at me and hastily corrected it. Later his vocabulary and feeling for words proved to be quite remarkable.

The second hour, he was somewhat less fearful and showed a certain pathetic eagerness to be helped. He sat rigidly on the edge of the couch with his hands in his pockets, moving

only once to straighten a rug. Several times his eyes had darted from me to it and finally he made a dash, straightened it and rushed clumsily back, remarking that when things were not even he must right them or 'bust'.

He stated that he was startled by any sudden noise and he struck out at the first thing at hand. He was always afraid he might strike a small child or a girl and unless he had something definite to do with his hands, felt compelled to keep them in his pockets. He never dared answer a telephone, fearing to speak to someone he could not see and who might moreover be a stranger. He disliked children, particularly girls, although 'they're not exactly my enemies'. He was afraid to go to sleep thinking his house might burn down. In school he could think of nothing but the fire alarm, and although the teacher had promised to warn him, 'she might forget'.

He liked his father and mother but when they 'got cross without reason' that made him 'pretty mad'. He recalled that when he was very little he was hit by the rocker of a chair and there was a lot of blood in the doctor's office. He does not believe he was frightened or hurt.

In the third hour, by request, he made a very clumsy attempt to draw his house. He first drew the 'bay window' but it occupied the whole space and was erased. Then he drew the front door with the steps leading up to it. Subsequently when it was suggested that his house represented himself, he immediately made the association of the bay window to his prominent abdomen and made quick and apt discoveries about other parts. A window was a finger with a ring on it, but the front door and steps he ignored and when called to his attention, he looked puzzled and said it did not look like anything except a bullet. At the end of the hour he began to twitch his shoulders and scratch back and arms very violently.

The next hour he came looking more sullen and angry than ever and jerking and nodding his head with such violence that he had difficulty in keeping his balance. He sat in sulky silence for some time and then said in a toneless voice that he was being kept out of school because he was 'shaking his head'.

The head movements gradually subsided but started again at the end of the hour. This became a routine sequence: gradual subsidence of mannerisms during the hour with a recurrence on leaving.

Talking of hostility and comparing dreams to fairy tales, he suddenly brightened and said: 'I guess fairy tales are just somebody's bad dreams', and told of a fairy tale he had once read. He decided the prince must be the author because he 'got even' with everyone.

He hated wasting time. He tried to get down stairs as fast as he could, and to urinate as much as possible so he would not have to go back for a long time, but could not tell what he was saving the time for.

The next hour he talked more freely and showed a little excitement. He had had a dream but forgot it. Once when he was very little he dreamed he had a bicycle. He said he sometimes thought of stories of which he was the hero and got even with his enemies. He would have liked to try them out but knew he would get the worst of it; even so he was always afraid he would forget himself and do something 'terrible'. He liked being sick because he was waited on and got presents, but soon he became afraid his mother would get sick or tired of doing it and that spoiled it.

He liked to look around doctors' offices and see everything, but wondered why instruments are shaped as they are—some straight and some curved. His doctor had some boys, '. . . a whole gang of them. I don't like them. I think they are crazy.'

'What does crazy mean?'

'To not know what you are doing.'

'Do you think you are crazy?'

'No, but if I have to do so much hard work I may be.'

He said he could never get his work done. His mother said he was not dumb but he was not sure. If he went crazy he might tear up the things he liked best. The thing he liked best was his chemistry set with which he hoped to find out of what things are made. Some day he hoped to discover some-

thing no one had ever known before. He liked to know of what ordinary things are made, especially rocks. Would he, perhaps, like to know what bodies are made of? No, he had been a little curious once but having gone to the museum where he had seen models showing the different parts of the body his curiosity had been quite satisfied. He was glad to have analysis because he hoped to learn things about his mind. He planned to become a scientist. Clenching his jaws and fists he added, 'I'll stick to it, no matter what I find out'. He had read that if the earth slowed down it would crash into the sun, but finding out scary things like that would not stop him. He might find out how to prevent them. Anyway, the more he could learn, the better chance he would have of saving himself.

The following visit he reported dreaming that his maternal aunt was buried alive. He had heard of people being buried alive, often wondered about it and hated the idea of being covered with dirt and having no light, air, or food.

A short time later after a dream about 'a microscope with a white drum halfway down the tube like the drum on a tommy gun, but white instead of black and smaller', he said the microscope 'shows you things otherwise not visible, especially germs'. With such a drum the right lens would be automatically fitted in as the drum on a tommy gun automatically fits in the bullets. With such an arrangement you would miss nothing. White is the opposite of black and a microscope is the opposite of a gun, the former teaching you how to save life and the latter destroying life. He discussed the relative merits of various kinds of guns, deciding that the tommy gun is superior because with it you can fire lots of bullets one after another.

He next came showing considerable excitement and said he had been in trouble at school. His mother had not arrived on time, and a group of boys were running around with some 'hot ice' (carbon dioxide snow) threatening to throw it on someone, and he was sure it was all directed against him. Wherever he went he was 'constantly threatened or actually beaten up'. In reality he was left strictly alone. The teacher believed the

children were afraid of him, and no matter how threateningly he stared and grimaced at them they never in any way retaliated. He talked at length of methods of escape, especially by the use of a flying belt, but everything seemed to involve some serious risk. He asked about 'hot ice', how could it freeze and burn. We discussed ambivalence and the balance of the hour was occupied with a discussion of chemistry of which he had a remarkable knowledge that he had obtained by himself.

The next hour he spoke with frank hostility against his enemies and especially of their making fun of him. This was taken as an opportunity to introduce the use of humor as a protective device.

The following hour he talked of his enemies. Girls he held to be silly; they played baby games and were cry-babies. Men in comic strips are always afraid of their wives. Gradually he came to an acknowledgment of his fear of girls. When asked the difference between men and women he could think of nothing except that women wore dresses without looking silly. He became confused and restless, his face white and perspiring. The analyst then made brief mention of the genital differences and he became excited but relieved and asked many questions about birth.

The next hour he came in coughing and said he had been doing so ever since the last hour. He coughed 'so hard he could hardly get a word out'. What words would he like to let come out? Well, he had to be careful with his mother because there were words she would not like. He asked about the nutrition of the baby in utero and showed much interest in the cord, an interest which continued for many months. He talked more freely but was uneasy and confused about how the baby got out. Does the doctor have to cut the mother open to get it out? Despite drawings and explanations this could not be accepted and nearly a year later he was again concerned about the danger of birth—the danger of explosion and destruction of mother and child.

The interest in the development of the baby continued through several hours. When he saw a drawing of the uterus

he became excited and said it was like the dream of the buried treasure—the triangle made by the roads. He was relieved to find that the ovum was so small. If it was big to start with and kept on growing for nine months it would stretch the opening so much and it might burst and that ‘would be the end of mother and baby’.

The following hour he was in great spirits, rang the bell in a dot and dash fashion, hoping I could make a message from it. About this time he began to be interested in wireless messages, thinking that if he had a wireless outfit he might get messages from his mind. He attempted automatic writing and became excited over the marks on the paper, feeling they must have some significance. At the beginning of analysis he was very reluctant to try anything with his hands and early attempts with a pencil were very clumsy. He had actually done practically nothing with his hands. He had learned to write a very little but could seldom be persuaded to make the effort. As the analysis progressed and he became freer in all his movements and in speech, he used his hands with rapidly increasing skill.

He had a dream of two types of trolley cars: ‘an old fashioned one and a twenty-fifth century one’. In the aisle was a case of candy. He was especially attracted by a cellophane bag of small yellow candy but he could not quite reach it. On a seat he found a hard yellow candy shaped like a fireman’s helmet. He ate it all up. In association he said, ‘Yellow means being a coward. It’s a funny thing that red is a signal of bravery because when you’re red you’re not brave. You’re blushing because of something embarrassing.’ The yellow helmet suggested a cowardly fireman who was afraid to go and rescue someone. This started a rush of fantasies of rescuing people from burning houses. Although he had thought of these things a great deal he never had been able to work out any method of escape which did not involve too many hazards. Perhaps cannibals ate the fireman because he was yellow. He was afraid of cannibals and often planned ways of avoiding them. That made him think of cops who seize the fireman

and put him in the electric chair (the twenty-fifth century trolley). Some places where they have no electricity they hang people (old fashioned trolley) but that is a horrible thought. The people would choke and cry out.

Following this came a great release of hostility, mainly against the boys who tormented him but increasingly towards his mother, saying once he wished she were dead. Later he could not recall this but was pleased to be reminded: 'If you don't know you are doing something you cannot be blamed for it'. He talked of smashing things, swinging his fists about and punching the cushions and the couch.

About six weeks after the beginning of analysis he came in, lay down, spoke no word but arched his abdomen in such a way as to suggest a pregnancy. He patted it and appeared to be enjoying himself thoroughly. He then made some indistinct remark about covering something. He suddenly began to tell of a daydream which he said he had been having since the last hour, about a 'wonder photo-electric cell' with which he did the most incredible things to surprise his enemies and save himself. However, as he came on the trolley he saw a sign warning him not to use it on any public vehicle or the vehicle might fall apart.

The next hour brought a dream in which the number eight was the outstanding feature. 'Eight is a most important number. It's even; it's made up of two zeros and is safe because no matter where you go you always get back to where you began.' Formerly he had said he had to do certain things to keep them straight but today he said he had to undo things because they were wrong and he tried to keep from doing things because it was almost impossible to undo everything, as so frequently the undoing itself was wrong and had to be corrected.

He again lay back and arched his abdomen patting it tenderly. When asked about this he appeared not to hear, but presently said he used to wish for a baby brother. If he had a child of his own he would make him good-looking. He would have no bay window and his brains would be in the right place.

I suggested that he was making a boy of the right kind and he absently replied, 'Maybe so'. After a silence he suddenly smiled and said, 'That reminds me of a story of Uncle Lucky who had a stove pipe hat of which he was very fond. Driving along he passed under some low branches. He bowed and said "I guess my hat is very much on my mind, but it wouldn't be on my mind if I hadn't been polite to the tree".'

Shortly after this he casually spoke of 'a crazy old woman' who yelled in the window at him whenever he was sick in bed. Whenever anyone came into the room she went away but as soon as he was alone there she was again yelling and terrifying him. Later he said that although it frightened him he liked it; his bed rocked up and down as though on waves and he had to hold on to keep from falling off. He also said he was going to be a crazy scientist when he grew up. 'You don't call children crazy, but when I'm grown up I'll be crazy.'

The following hour he said how mad his mother seemed to be all the time, always arguing, far worse than she used to be. He struck his right palm with his left fist over and over. I asked him if he were striking his mother and he laughed with glee and repeated it many times. His reaction in this respect was interesting. As we progressed his mother 'improved', people became friendly and even animals changed and seemed to be attracted to him.

The next time he came in looking very sulky and talked of everyone picking on him 'because of my bay window'. He drew a picture of a clown with a fat face and turned up nose. Turning the picture up side down he saw another, a very ferocious face. He was fascinated. The clownish face he shows to the world and the fierce, hostile one represents his true feelings.

By this time he seemed very comfortable in analysis, no longer found it necessary to watch me and moved about freely on the couch, rolling about and bouncing up and down. His bouncing and rolling about gradually worked into rhythmical movements accompanied by a rhythmical droning. At times he was completely preoccupied with this and did not appear to

hear when spoken to. In the beginning he had been greatly perturbed by unfamiliar sounds and required a detailed explanation, but now he seemed unaware of them.

He came in one day with tears in his eyes and acted very much like a normal child with hurt feelings. The occasion was a very slight frustration for which he held his mother responsible, although she actually had had no control over the situation. Previously he had shown nothing but anger at a frustration and had never been seen to shed tears.

About three months from the beginning of the analysis he again spoke of the accident to his head, but with much affect, recalling details, saying it had hurt terribly. He had been terrified and thought they were trying to kill him. He said, 'I guess if I had had a hatchet I would have smashed that chair when I got home'.

His mother at this time reported a marked change in his behavior. He had become 'saucy', told her he hated her and was going to grow up to be a bad man—was going to hit people when they were sitting down, especially girls, and even kill people. He was eating much less and had become critical of the food. In analysis he was almost gay at times and had started to pun, sometimes spending most of the hour doing this and showing much delight in it.

One day he came in gesturing in a way which suggested balancing. His eyes were apparently intently fixed on something immediately in front of him. He casually explained that there was a glass spiral tube there. 'The spirals go round and round and you can't see the end. At the top is a little oil and I must keep it balanced or the oil will run down and more will come in and it is important to prevent that. It has just been there lately.' Later he said oil was the only thing light could not go through. There were no associations to this and I felt he was presenting me with a picture instead of words and when I interpreted it as his representation of the analysis he was delighted.

The next hour he spoke casually of a rubber band attached to the middle of his back which made it necessary for him

always to go back the way he came to prevent getting tangled up. Everybody, he stated, had one but others seemed not to have any trouble with them. No further mention of this was made until three hours later he came in looking very much distracted, sat down on the edge of the couch, rolled his eyes for a few minutes and then staring fixedly at me began grimacing furiously. When I spoke he appeared not to hear. Presently he said the end of his rubber band was attached to the bed where he was born. It collapses when he lies down and pulls out to any length when he moves about. He then described in detail the room where he was born. The mother was consulted and she recognized the scene as an exact description of the hospital room he occupied when his tonsils were removed. She was greatly astonished as no one had ever mentioned the operation to him or made any mention of attendant circumstances. Alan began to tremble with excitement and his face became chalky white. He said it made him feel terribly frightened when she said that.

The next hour he showed considerable tension and said he could not remember what had been talked about the previous hour. Questioned about the operation he said it made him think of the shadow of doom, a large black shadow shaped like himself which came closer and closer down over his head which it held tightly and then the lights went out. (He was very restless in a room in which the light was even slightly dimmed and had the window shades so arranged to let in the greatest amount of light.) He said when he had hurt his head he thought they were trying to kill him and when he saw the shadow of doom coming towards him he thought they were trying it again. Later in the same hour he said he had gone to the museum a few days ago and looked at rocks. He saw some radium which fascinated him. He commented on the astonishing things to be found in the earth. During the past week he felt he must buy chemicals. He did not know what ones he wanted nor what he would do with them but he must have them. He wanted to make things grow.

The following hour he told a dream about an amusement

park in which there was a tunnel for trains. People seemed about to get on but they never did. Outside, people sat in a circle and there were swings filled with foreign children in black and yellow costumes. This reminded him of a movie about a tunnel connecting different countries. A volcano was stirred up by it and the lava flowed down it.

His use of humor (amusement park) in approaching material fraught with anxiety is noteworthy; also the enviable play of the 'foreign children in black and yellow' made safe by being in a circle.

This was followed by a dream of shooting at trees with a double barreled shotgun. One tree was hollow and had bees in it. He shot at it and the bees came out and chased him. He shot at the roots of it and the whole thing fell over. Later when he began playing freely, over and over he built towers which were attacked at the base by an enemy and knocked over. His uncle has such a gun and Alan would have liked to have one but was sure he could never use it. Shooting trees made him think of the crazy old woman. This seemed to him 'queer and silly'. He then lay down and assumed the attitude of pregnancy (he had not done this for several weeks). I pointed out the relationship between shooting trees, the crazy old woman and making a baby, and explained trees as a sexual symbol. He then recalled a joke about a man who was to be hanged. They asked him what tree he would prefer and he said a huckleberry bush. I called his attention to the connection of sex and death and he said, somewhat defensively, 'Well, women sometimes die when they have babies'.

Some days later he made mention of the band in his back and it was suggested that the bed to which the band was attached might be his mother. He acted as if he did not hear but soon began asking questions about birth, showing particular interest in the cord, wondering if it hurt when it was cut. I asked him exactly where the band was attached and he said just where a safety belt would be. Perhaps he might not wish to be rid of it; perhaps it was a safety belt. After a pause he said, 'Well I can't go anywhere without her'.

He was absent from analysis for three weeks. His mother reported a remarkable improvement in his behavior. He had become pleasant and was at times quite demonstrative with her. He was much interested in a white rabbit that had been given him, but he handled it very roughly. She was pleased at his interest but disturbed by his cruelty.

Alan came in grunting and slapping his right thigh at intervals. He said he was glad to be back but appeared a little resentful. He resisted any attempt to analyze the grunting which continued through several hours. Sometime later he dreamed of being in a store with his mother buying chemicals. There were some unusual stairs there. He immediately started grunting and looked at me saying, 'Well I'm grunting'. This was meant to be facetious and when I assumed it to be an association he objected with some irritation. After a silence he laughed and said, 'If you could press a button and the stairs disappeared and down below would be a bed, you could just fall on it and bounce up and down'.

'So there is a relationship between bed and stairs?'

'Yes', with surprise, 'like the bed going up and down'.

Subsequently he showed a great increase of activity, more assurance and aggressiveness, at times being rather arrogant. He went to the movies with another boy without his mother and showed more independence in many ways. The fire alarm rang in school and by some mistake he had not been warned. He was startled but realizing he was not very much frightened, was excited and pleased.

About a week later he brought in the following dream which he had difficulty in telling because he kept forgetting it.

He was in a doctor's office waiting to have his tonsils out. There were several ahead of him but finally the doctor said it was his turn. The doctor seemed to have on very dirty gloves like a laborer. He awoke terrified.

He promptly forgot the dream and objected to any mention of it. Suddenly he asked, 'Can blood come out of your ear?' He then recalled seeing a little boy whose leg was hurt and

bleeding. He spent the rest of the hour playing with his fingers, waving his feet in the air and making a variety of noises.

At a later hour I reminded him again of this dream, whereupon he pinched his nose and tried to talk being much amused at the result.

Suddenly he said, 'Pin feathers'; after a pause, 'hey, you can't fool me with those whiskers you, pin feathers'.

'Who is trying to fool you?'

'That guy with the false whiskers, the doctor.'

'Who is he?'

'I don't know: my father maybe.'

'Your father was the doctor?'

He looked at me in astonishment and said, 'Where did you get that idea?' I repeated what he had said and he laughed and decided it must be right although he could not imagine how it came out; he certainly never thought it. He was again defending himself by the assumption that he could not be held responsible for something he was unaware of doing.

He became very restless and active during the hour. He looked at and touched the toys but still did not start to play with them. His mother said he was beginning to play with other children but was in such fear of their going away that he was afraid to leave them for a moment and gave in to them in every way. He was so clumsy and helpless that their interest was held only by free use of his things and by their ability to dominate him, although he was much larger than they.

He began soon after this to have many very pleasant day-dreams, during the hour in which he played all manner of tricks on his playmates, taking them by surprise and keeping them in terror and suspense but never actually injuring them, always rescuing them at the last moment by the use of flying devices and a safety belt. Later he spent a great deal of time playing with toy cars and aeroplanes. An aeroplane would tease and threaten the cars and finally wreck them one after another.

One hour he said 'bay rum' had been in his mind all day.

He pulled a knife out of his pocket, opened it and came towards me, saying, 'I'll kill you'. When he was close he snapped it shut, adding, 'Tomorrow'. He was very anxious that I understand it to be a joke. Bay rum he said his father used after shaving. That reminded him of a detective outfit with false whiskers for disguise. If there is a detective there must be a murder 'even if I have to do it myself. Ha, that's an idea'. He talked somewhat incoherently about murder finally saying, 'I guess if you can't kill the one you want to kill you kill yourself and that's suicide'. He walked up and down in great excitement for some time, not speaking and apparently did not hear when I spoke to him.

Questioned about the necessity for always having his mother with him his answers were trivial and inadequate, until finally he said, 'Well I guess I'd like to jump back inside and be safe and when the danger is over come out again'. Told again that he was attached to his mother, not the bed, that his fear of his father killing him was so great at the time of the tonsillectomy that he devised this safety device, he became flushed and excited and said, 'well that makes sense'. As usual after such an interpretation there was a period of relief marked by silly, infantile behavior—rolling around on the floor, incoherent talk. Following this hour the mother reported he was singing and shouting all the time, was never still. He paid attention when spoken to but no matter what he was asked to do he scowled, said no and then went ahead and did it.

He had a dream of three typewriters (his mother was formerly a typist) the middle one being defective. He recalled that he seemed to be in bed between his mother and father when he suddenly pulled the defective typewriter from under the bed clothes, and asked his mother how she liked it. His mother sleeps on the right side of the bed and his father on the left. It was the right side he stamped on and the left he protected.

He began playing with clay, making a circle and then pulling a piece out remarking, 'A piece comes out like that and you hang it up'. The next hour he made tails of various sizes.

Asked the purpose, he replied they were to keep people from being twisted. He laughed and added, 'If the band in my back was a little lower it would be a tail'.

The next time he brought a dream of 'someone going about killing people called the shadow because he was all black. Alan broke a window and looked out at him and found that although his suit was black his hat was white. In association he said it seemed that he had to kill those he had killed and more too to keep from being killed himself. He recalled the shadow of doom. Perhaps they were the same. Black means death and white the ghost you are after death. He had to kill the 'old lady who yells so loud she drives me crazy'.

A few hours later he said he had thought the tail attaching mother and child belonged to the mother but was now wondering if it belonged to the baby. This idea of the female penis being in the navel seems to be not uncommon, but this is perhaps an unusually clear presentation of the logic of the fantasy. He became uneasy and as usual when anxiety is too great he fled to a safe distance and began a cautious advance. 'What are kidneys? Is there such a thing as Bright's disease? I heard of someone having it.' Presently anxiety lessened and he said sulkily, 'Anyway I don't see why girls don't have them too'.

Next he was climbing on and tumbling off the couch when he suddenly said, 'Sometimes I don't know whether I am here or just think I am'. He said it had something to do with his tail, the revised version of the rubber band. 'I know now I haven't a tail but it's there in my mind.' Asked the advantage of having a tail he said, 'To fight with, to hit people. If there was a bull after you, you could stiffen your tail and when the bull ran on it you could stab him, but of course it would be in the way. It is. I mean it would be.'

'Why do you have a tail?'

'To get back into mother. I don't know how long my tail is.'

'You said it was collapsible and could be any length necessary. Perhaps a tail is a penis?'

'I might have thought so but it's put in the wrong place.'

'Is it like the tail, sometimes big and sometimes small?'

'Yes.'

'What makes it change?'

'I don't know.'

He became facetious and said he did not want to know.

'There are things to know and things not to know.'

The next hour he had dreamed he, his father and mother were driving along in a funny old flivver. Over the front was a vine with an egg at the end. 'I seemed to be falling off and I held on to the vine for support. A dog seemed to be yapping at my heels. There was a cat and we stopped and helped her up. The dog had been chasing her. She was a bobtail. She had had a tail but seemed to have lost it. The stub was bleeding and had hair at the end. I guess a dog did it. I guess the dog said, "There, that's a sample of what I'll do if you don't stay away from me".' The next thing, he said, would be to kill it. Reminded of his girl enemies and asked if all boys and girls were enemies, he agreed and stated girls were like cats and boys like dogs.

'How could a boy injure a girl's tail?'

'He might stab her or shoot her.'

'The other day you wondered why a girl had no penis.'

'I guess they dry up and fall off.'

'Then you think a girl is born with a penis?'

'Not now, but I used to think they were the same as boys.'

'How could a girl lose it?'

He looked disturbed, began playing with clay and after a while he said, 'Well I guess way back in those dark ages a woman had her's hurt—clawed off I guess—and then her girl baby had none. All the other women had no children and so no girls have had them since.'

Several hours were occupied with a pantomime of stabbing and being stabbed, falling in a faint with eyes rolling. This represented the war between men and women. At the end of one hour he said, 'Women seem to get flimsier and flimsier; turn back into monkeys and become so small that they finally

disappear and men get bigger and bigger and more like mechanical robots until finally they are as big as the world and rule the world'.

After a two week vacation during which he was very happy and his mother was delighted with him, he said he had an unpleasant dream of people fighting. 'Others get the best of it. Girls are lucky, everyone is good to them.' Asked if he would want to be a girl he replied, 'What are you talking about? Of course I wouldn't.'

He began rolling about on the floor, humming a little and looking very content. Suddenly he said, 'Perhaps I am a girl and dreamed all this. I really can see a girl. She has blue eyes and black hair but her eyes have a black smudge and are getting blacker and blacker and will soon be all black because she is so mean. She's very ugly. Her hair is blacker than anything you ever saw and you know what black means—death. She wants to kill everybody. She wants to destroy civilization and rule the world. Everybody hates her; she is so mean. She thinks she can turn the world back into a jungle and rule it but she can't—nobody could—they wouldn't even understand her when she called. She wants to kill me most of all. I don't know why.' He spent the rest of the hour rushing about, dodging and hiding, making banging noises.

The pantomime of being pursued and having narrow escapes was interspersed with comments about a girl who killed her father and mother and treated her servants very badly. She was always watching for him and sneaked up on him. That was why he must never go out of the house without his mother because she could not touch him when his mother was there. She lived near his house and was always watching for him. He played with his knife for awhile and suddenly the girl came up and hit him on the head. He fainted, recovered, became Tarzan fighting a man whom he knocked into the river. He then became the man fighting crocodiles because they are the hardest animals in the world to kill. Shortly after he began a rhythmical humming which seemed to afford him much pleasure. When this had gone on for several hours he came in one

day hopping on his right foot, making violent thrusting motions with his right fist and humming loudly. The thrusting movement was to push away the girl. He piled cushions on the couch. 'This is a high hill. I hope I won't fall off. Do you know the highest volcano in the world? Oh, there's a giant asleep on top of the volcano and down here are a lot of little people.' He used his fingers to represent the little people. They began climbing up but soon realized there was to be an eruption and ran for their lives. The volcano poured forth lava and from a geyser at the foot of the mountain spouted hot water. The giant was very friendly—made a village for them and helped them escape. They were all comfortably settled and began again to climb the hill when suddenly there was another eruption.

I suggested that he say it instead of playing it but he said he was scared of words and laughingly added, 'Get me? Too scared for words.' He lay down, fell off the couch, explaining that he had fallen off a high cliff into boiling water and was being burned to a crisp. I reminded him that he had once said hot water came from the penis and he promptly began talking about his bunny. 'Hey, what am I supposed to be doing? Well anyway I would rather talk about my bunny.'

His mother reported that he was wetting himself and she was worried about it but had the feeling that he was not quite aware of what he was doing. This lasted about ten days.

Later he came in quietly, lay down and after a silence said, 'Aristodemus'.

'Who is Aristodemus?'

'Oh! a Greek boy.'

'Tell me about him.'

'Oh! there's nothing, just a boy.'

'Are you Aristodemus?'

'Well I wouldn't want to be him when he was cursed.'

'Who cursed him?'

'His mother.'

He explained that Aristodemus had been misunderstood and wrongly accused of cowardice. This was followed by a jerking

of the whole body and humming in a forced way involving the abdominal muscles. I asked him if he could recall a time when his mother had seemed to misunderstand him. 'I remember being spanked but I don't know what for. I felt mad and wanted to spank her,' he said. Abruptly he asked if I had ever heard of dynamite being used to blow things up from the depths.

The next hour without preliminaries he began compulsive play which as usual became increasingly relaxed. He was a diver fighting another diver at the bottom of the sea, with many narrow escapes from sharks, and accidents to his diver's suit, frequent calls for oxygen, but final success. This fantasy of explosive birth is not infrequent and another choreic child had the fantasy of the uterus as a balloon which was in danger of being pricked by the father's penis.

Alan now rested for a period and then made a bird bill with two pencils in his mouth and attempted to talk: 'Big grandpop tweaserbill'. 'I don't know who he is, just came to mind, maybe once I wrote that on the wall without knowing. I guess he wanted to eat somebody up.' More gibberish with the pencils in his mouth and much merriment, then, 'Do you want to hear a story? One cannibal says to another, "Say who was that lady I saw you with last night?" "That wasn't any lady", says the other, "that was my dinner".'

The following hour I questioned him about the previous one and without a word he sat down and drew the picture of a little old man guarding a machine gun with a flag on it. I understood I was pressing a little too hard and accepted the rebuke.

The next hour he drew a policeman (analyst pursuing him too relentlessly) rushing along so madly his collar button flew off and hit him on the nose. He thought someone hit him and angrily set off in pursuit. He fell over a precipice into hot water. On the opposite bank was a criminal just released from prison. He was 'crazy enough to try to ski down a moonbeam, fell through and landed on the earth with a bump'. This was very amusing and between gales of laughter he burst into song.

An increasing use of humor helped dispel some of the intolerable anxiety and reduced his fear of the analyst.

The following hour he made an association between spanking and bed, and was told that mother spanked him for what he did in bed. His rocking up and down on the bed and the humming were substitutes to trick her but he was in constant dread of her discovering it.

He then brought a dream in which he, his father and mother each had ten cent tubes of toothpaste of a reddish brown color. This was a pleasant dream. The toothpaste looked as if it would taste good. The numbers one and zero reminded him of a combination compass and magnifying glass which he took from his pocket and said, 'See, two in one'. When opened, the needle of the compass made a figure 1 and the glass O. It further reminded him of a nipple and a penis. He drew a picture of the tube and observed its resemblance to a penis.

The reddish brown color was discolored milk. What would discolor milk? Blood. How could blood get into milk? 'You might break a tooth and the blood would go through the stomach and out the milk.'

The cipher now suggested dirt and he began a play of being shot and falling in the dirt. He pulled himself up to the edge of the table and pressed his lip against it leaving a 'lip print' in the dirt by which the enemy discovers him. The lip print was also a cipher made by the mouth. The O is mouth and dirt; the 1 is penis, and also the gun.

Finally he was shot in the mouth and died. This was not interpreted because while there continues to be a free flow of associations in any form, not necessarily verbal, the child is sensing the situation and there is a certain danger in confusing him by the words, however clear they may seem.

The next dream was of Alan, mother and father driving along a road. They came to an underpass which seemed to wriggle like a snake. He hoped they would get through in time. After relating this he took several pennies from his pocket, 'passed spells' over them and then looked intently at them. He then began playing with colored crayons, 'melting

metal', to get different ores. They were so hot he had to be careful about touching them. He reported he had been wetting himself lately and his mother was very cross about it. Told that it was an expression of anger with his mother, he was relieved, immediately saying he hated having to come in from play to have a bowel movement. He had been wanting to collect 'about a test tube full of blood' but that was a very difficult thing to do unless you kill someone. He had often thought of going hunting but had come to like animals too well to kill them. He rolled around on the floor like a very young child and said presently, 'I guess everybody has things in their mind that belong to them and no one can understand'.

'There are things in your mind you are afraid to let anyone know, perhaps are ashamed of.'

'Yes.'

At the end of the hour he pushed a stool over beside me and said, 'Can you put your fingers around one of these legs without bending over?' He moved it into such a position that there could be no doubt of it and when I accomplished it easily he showed much satisfaction.

My success in meeting this test made the next step possible. The next hour using blocks and clay he built a 'sacrificial altar'. The human sacrifices burn up and the gods gather up the smell and change it back into people whom they eat. Suddenly he showed panic—a murderer, a giant, came in the door and attacked him. He quickly took a 'walking mechanism' from his pocket and it walked off. It could be hypnotized, and when it reached the hypnotic atmosphere it began walking in a jerky way. Alan became the hypnotized walking mechanism and adopted his former jerking, twitching mechanical movements, going along dangerous precipices, finally coming too close to the edge and the heat from the lava (*fæces*) below destroyed the hypnotism and he hastily climbed up on a safe rock. He rested comfortably for a while and then 'felt rumbles', something moving under him. A geyser (*urine*) shot up and he was scalded a little but not really burned. After resting he stepped off into red, black and white lava

(blood, faeces, milk and semen). It was very hot. A giant appeared around the corner but instantly an aeroplane (Alan) swooped down and shot the giant who fell into the hot lava and that was 'the end of him'. Alan got some lava on his foot, jumped into a lake to cool it off, felt something wriggling towards him. It jumped into his mouth. Rushing out of the lake he had a bellyache from the snake wriggling around. Suddenly a second giant appeared. The snake jumped out of Alan and into the giant. 'What worm have I swallowed?' asked the giant. 'That's no worm, that's a snake', said Alan. 'Oh! I'm dying', moaned the giant who almost died. Alan fell to the ground writhing with a pain in his head. 'The pain has traveled up and out it goes. Oh! it's in my toe; up my leg. Oh! it's all over me and now out.' The pain spied the giant and jumped on him, frightening him so badly he ran and fell off the end of the world.

Alan now came back to reality, sat up with shining eyes and said, 'I guess that's enough adventures to give anyone a headache'.

Following this portrayal of his 'life story' Alan was perceptibly more assured. Most of the following hour was spent playing with pennies in the corner of the room with his back turned. He smiled reassuringly at me from time to time over his shoulder.

The following hour he asked many questions. 'What is lava? Is it melted rock? If it's melted why isn't it powder? If you take graphite and iron and melt them together you get a diamond, a synthetic one. Isn't that the same as the kind made in the earth, only made by man? Man is a melting pot.' He talked of savages becoming civilized. He became suddenly fearful: 'They may get ahead of us and be the rulers'.

The next hour he came in in high spirits, playing at putting in false fire alarms, and when the cops came inquiring he made sport of them. This was repeated with variations and great glee. In the midst of this play he asked irrelevantly, 'What is weaning?' without apparent awareness and without wanting an answer.

The following visit he went through a pantomime of drowning, followed by the building of a volcano. An eruption threw lava into the river and the great heat dried it up. Now the compass and the magnifying glass were carrying on a conversation each wanting to go in a different direction. He pretended to chew them up and swallowed them, and in his stomach they continued to pull in opposite directions, finally flying apart, causing an explosion which blew a hole through his stomach (explosive birth).

Shortly afterwards he began smelling the clay saying he liked smells. Smells made him think of 'perfume and the opposite of perfume is ammonia—tricks—tricky tricks (trying to do disappearing tricks with a marble), ammonia is perfume in distress'. This was readily linked up with bed wetting and the masturbatory rocking of his bed.

The next hour he began 'balancing tricks'. He would pile a variety of things on top of one another and finally he would knock out the 'corner stone' and it would all topple over. All the while he was carrying on a conversation with himself:

'Ha—trying to spoil my show you little so and so. I'll, I'll . . . I'll do plenty. You won't. I will. You won't. Oh! you think all there is to killing pigs is sticking a knife in them. Well it isn't so simple; you boil off the hair and lots of things. What do I want to know that for? Oh! I don't know. Where am I? Right here at my mercy if I have any. I'll fix you—you—you—something. I can't think of a word bad enough; you with your balancing tricks. I have you at my mercy. I'll take you home and give a public show. Oh! no—no. Yes. Ladies and Gentlemen I now present my captive.

A report was received from school to the effect that Alan was very impertinent and causing a great deal of disturbance. His mother complained that he smelled everything, especially at the table, putting his nose right into things and saying they smelled of ammonia. He was rude, completely disobedient, and several of his old mannerisms returned.

I spoke of these reports to Alan presenting the picture from the point of view of teacher and mother. He was very much

interested and astonished. He said he liked all smells, liked to feel his nose 'full of it'. I pointed out that he might enjoy smells without annoying other people. I had thought it possible that he was ignoring its meaning because he had the idea that analyzing anything meant giving it up. This evidently was the case as he continued his smelling in a more acceptable fashion. It gradually decreased but he continued to have an unusual interest in odors.

A play on words continued through many hours and in lesser degree for months.

The 'word freedom' accompanied the balancing play throughout several hours. 'We meat on Fry day. Do you get any assassinations from this?' This was an invitation to ask a question. He was asked to tell about balance.

'There's a nerve in your head which makes you balance; if it isn't there you can't keep from falling.'

'Is there something left out of your head?'

'Yes, the thing to keep my mind on the things I should.'

'So your mind is on things it shouldn't be?'

'I guess so.'

The next hour he reported a dream about an elephant which gave maple syrup as well as milk. Alan was putting the syrup in a fire to make sugar and was dipping the fire out with his hands. It seemed very odd but very pleasant. The recounting of this dream was followed by much gay play, lassoing things in the room, making speeches with something pressed over his mouth. The resulting gibberish was elephant talk and so, of course, could not be understood by him or by me.

This dream picturing abandon of all known rules seemed to symbolize very well his new found freedom and was perhaps especially significant as he now began a two weeks vacation period during which he was very happy. His mother reported him as being very pleasant at home despite a quite severe disappointment.

Soon after his return he came in nodding his head violently and looking perturbed. About the nodding he said, 'I don't like it. I have to do it. It's like bumping my head (which he has done at times on floor or wall since a very young child).

It's likely to shake my brains up and bruise them. She tells me I have to do it.' After a pause, 'What is a dram? Did tree dwellers or cave dwellers or lake dwellers come first?' He sat down sullenly on the floor and began thrusting his hand at the girl.

'Perhaps you want to be friends with her?'

'No, I want war. I mean she wants war not peace, the little so and so.'

'You like fighting with her?'

'No.'

He played with blocks for a while and presently asked, 'What's that stuff, you know, semen, vemen.'

During the next three weeks there was very little material. He seemed a little withdrawn, indicating that I had missed something probably when he asked who came first, although he did not at the time seem to want an answer.

He evidently was feeling doubts about the truth of the information I had given him. Whether this was an inevitable phase in his acceptance of reality, or whether I might at some point have given him adequate reassurance I do not know. It is important with children to avoid adopting attitudes of omniscience or magic. It is important for their acceptance of reality and relinquishing the fantasy of omnipotence. The example that it is not necessary to know everything is very reassuring. The danger to be avoided is that the beginning of acceptance of reality and 'finding out' the analyst coincide. The shock might well prevent a satisfactory recovery.

Alan talked of snake venom and how to treat snake bite, all the time playing at mountain climbing which was accompanied by many falls. One day while playing more freely than he had for some time he said, 'semen—vemen—hot—steam—getting nowhere at top speed. Why cry over spilt milk. Meow. Milk ain't everything—no? Meow.' He was asked, 'What about milk and semen?' He replied, 'To feed a baby. A long time ago before babies were fed milk they were a lot healthier. Milk and semen are slow poison. Gradually babies are killed. Parents all die too because of the semen.'

Gradually it became clear that the fantasy was that no one is

real, everyone had been poisoned by the bodily secretions of another and had died. Bad spirits had entered into their bodies and made them appear like living people. The unfolding of this fantasy covered several hours. He was trying to find a way of having babies without women. Anything which passes out of the body is poison to everyone else but not to oneself; like snake venom.

He built a tower with blocks: 'Could you have a window so high that you could look out but no one could look in?' 'What would you like to see without being seen?' 'Nothing. Supposing you could make a glass that you could see out of but not into; supposing they used it on a girls' dressing room; supposing it was put in the wrong way.'

In a dream he was told he would find nuggets of gold if he dug in a certain spot. He found first a white bag and inside it a second white bag with blue writing on it. In it were nuggets but instead of gold they were chunks of yellow peppermint candy which burned his tongue. He gave no associations but waited expectantly and it was suggested that perhaps the white bag meant a part of the body, a breast. He expressed simple agreement. Evidently I was again being tested.

The disappointment in the dream is a necessary part of the weaning process. It is the development of a realization of needs which can not be met by the mother or in this case by the analyst.

The next day there was a trolley car accident. He had by this time been coming alone, making the trip across town on the trolley. He came in white and shaken but refused my offer to accompany him home in accordance with the courage he had shown throughout the analysis. The next hour he was still frightened but came alone and was quite pleased with himself. Thereafter there was no fear, but rather an increased sense of power.

He began to take a greater interest in the room, looking at pictures, books, and then began a detailed examination of the waste paper basket. Finally he said he was looking for a hypodermic needle with which he would like to experiment,

to inject into some person or animal some fluids which he would invent. I said perhaps he wanted to know whether bodily secretions would kill. He said if it did not kill them it might make them bigger and better.

The head nodding increased. One day he came in looking very uneasy, said he had fallen and hit his head. He looked appealingly at me. I asked if the girl had been responsible and he said maybe she would make him fall and kill himself.

'Why is she so bad to you?'

'I don't know.'

'Does she think you are doing something for which you should be punished?'

(Relieved) 'I guess so.'

'Is it wanting to see people?'

'But I don't.'

'Oh! yes you do. Why not? You want to see people without clothes, see them at the toilet, having intercourse, see a baby born and being fed.'

(Grinning delightedly) 'Well, maybe not all that.'

'But you don't want to be seen doing it.'

'Well, people don't act the same if they think someone is looking.'

The next hour we had a new mannerism of looking at the left side of his nose with his head turned and eyes half shut. He evidently wanted me to note it but was not yet ready to talk about it. He abruptly said there were words he wanted to say, felt as though he would burst holding them back. After considerable hesitation he wrote them down. 'Darn, damn, hell, devil.' As I read them he shivered with excitement. When nothing happened he was still apprehensive that something still might happen. He especially wanted to say these words to his mother but knew she would not permit him. I spoke to his mother and she would not permit it. I explained the significance but she still refused, saying that if they allowed him to do that he would go on to worse things. Two weeks later the school reported that he had been progressing well, acting, in fact, as a normal child when suddenly he became very

unruly, striking the other children, making disturbing noises and grimacing at the teacher whenever she spoke to him. His treatment of the children was so alarming they were afraid to keep him in the school. I sent for the mother and connected this behavior with her refusal to permit him to use swear words. She reluctantly agreed to permit the swear words.

That day Alan came in looking very sullen and kicking violently with his right foot. He said they were all accusing him of things he did not do and he was kicking because he could not use the swear words. He had tried them in school in a whisper and nothing had happened but it did not help because it was his mother he wanted to 'curse'. I reminded him of the Greek boy and he agreed that he was afraid if he cursed his mother she would reject him but until he tries her out he can have no security.

When he knew his mother would really let him say what he wanted, the change was immediate and there was no further difficulty in school. He again looked at his nose in a compulsive way and explained that when he was supposed to be reading he looked 'very hard' at the spaces between the words. I interpreted this as his curiosity about what went on between mother and father and without a word he began a pantomime of shooting. He then asked if anything could be done about scars. He made a pun on the words scared and scarred. He admitted he was scared. Later this was found to refer to the scar of circumcision.

At another time he said that when he had to look at his nose he was afraid some girl might think he was winking and take it for 'the signal' at which all women attack all men. He then became worried about how one can be sure which is a male and which a female. Perhaps a girl sometimes 'pinched off' a boy's penis and stuck it on herself. There would be no way of knowing which she was until she grew up. No one really knew the sex of anyone until they grew up. The one who had a baby was the female.

He now revealed his uneasiness about himself. Having a round face he feared he looked like a girl. Boys had accused

him of being a girl because of his 'bay window' and what they thought is there.

Next he evolved the fantasy that it was really the girl who was curious about intercourse and wanted to try it, but was afraid he would tell, and so she was trying to make him kill himself. From this was a short step to the realization that he wanted to have intercourse with someone he should not. Was it perhaps his mother? To this he casually inquired, 'Has it ever been done and would there be any children?' He figured out all the complicated relationships which could ensue, relieving the tension by making a joke.

The next hour he was sulky and evasive and when I asked him a question he pulled two knives from his pocket, stared at me in an intense and very threatening manner, half crouched, and coming toward me demanding, 'How would you like to have these stuck in you?' When I made no reply, he became more threatening and repeated, 'I asked you how you would like me to stick these into you?' I replied that of course I would not like it, and smiled. Instantly he became uncertain, hesitated and gradually retreated. He played with the knives, occasionally dropping them on himself and saying 'ouch'. Presently he said he did not want to come any more. He was afraid he would have to jump out of my window, and it was all my fault. He is afraid he would be compelled against his will to try having intercourse and rather than have this happen he would have to kill himself. He wandered about restless and uneasy. He began to play with an aeroplane swinging it violently against various objects in the room. I told him this was an assault on me. He then recalled two dreams he had had, one of a tall tower which he had built. It was dark and so he built a sun; then he did something to it and it tumbled down. The second was about a stream. Cows, male and female, were going down it. There were some gun butt holes in the bank and Alan was trying to fill them with water, and with some toy cattle was imitating what the real ones did. This represented his fear of intercourse and his retreat from the real thing to acting it out with toys. Why

was he so afraid? 'Isn't semen hot?' he asked. He thought it always burned and might cause death. He said he did not think I had told him untruths but how could he be sure I really knew.

The next hour he said he had gone to the library for a biology book. He mentioned several things he had read. I approved. He was no longer dependent upon me for everything; he could find out himself.

It is interesting to note the small amount of hostility displayed towards the analyst throughout this analysis, and only when the weaning process was well advanced, was his anxiety directed towards the analyst in the form of intense hostility. He could trust the analyst no more than he could his mother. For a long time he had to test the analyst to make sure she could understand and accept his hostility without retaliation.

A short time later he asked, 'would you smoke a pipe if you had to?' 'Why not?' I replied. 'I wouldn't', he said, 'I'd get sick. My father smokes a pipe. He has one that belonged to my grandfather.' I said he was afraid he would not be able to do as his father and grandfather did. Immediately he built a tower and then knocked out the corner stone. He was very restless and appeared distracted.

The next hour he snapped his jaws as he had been doing earlier. I said his fear of having his penis pinched off was fear of retaliation for having bitten his mother's breast (bitten off her penis) and he said maybe so and began to play more freely than he had had for some time. He made a clay dinosaur. The dinosaur climbed a wall, lost its tail, was rescued, climbed over a cliff, again lost its tail, was saved again and its tail restored. He crawled under the table and hit his head: 'If that was an axe I'd be done for'. He asked if I had ever heard of the elephant falling over a cliff who was saved because its tail was tied to a daisy. No, I had never heard that one. Neither had he, he retorted, thereby giving me to understand that although things were again going along smoothly, he was by no means taking me too seriously. He made a snake with

large sharp fangs: 'anyone that got a bite from that would be dead'.

The following hour he again played with a snake, breaking off a part of its tail (a snake being, as he said, all head and tail) and putting it on again, making it spring out suddenly in attack, and finally at the end of the hour he left it wound around a door knob ready to spring at anyone who came through the door.

He continued restless and ambivalent. He was no longer afraid of jumping out of the window but wished he did not have to come. His mother said he was not trying very hard or he would be through. He did not know what to think; I said one thing and his mother another. He wished he could have a vacation all by himself to get away from both of us. He then asked, 'What are bladders for?' He had once touched a chicken's gall bladder and it burst and got all over his hands. Where does the stuff come from? Which way does it go? He had tasted bitter stuff. What was it? Why did it go the wrong way? Where was the appendix? What use was it? Suddenly, I wish I never did'.

'Never did what?'

'You'll have to guess.'

It proved to be vomiting. At a later hour he recalled he had once vomited something which looked like an undersized banana and it frightened him. Where did it come from? What was it? Perhaps his appendix came up. Appendix was promptly associated to penis and nipple, 'with the blood sucked out'. He had bitten off his mother's nipple to get even and it made him sick.

The next hour he brought in a dream of boys shooting at a target. He was not allowed to participate; he could try it with a toy outfit but could not join in the competition. In association he said he had wanted an air rifle but his parents said it was too dangerous: 'I suppose you could hold up some one with a toy one—frighten them. You might fix it to work once and then it would fall apart and be no more use.' Was

he wondering why his father had only one child? Yes, he wondered why they never had another.

The next hour, playing with some coins, he questioned which were true and which were false? Perhaps they were all true. How could you be sure? He began looking at his nose.

'You want to see father's penis and see if it is like yours.'
'Well, I've often wondered if boys' were different from men's.'

He gradually became freer, asked questions and we looked at pictures. He discovered he had been circumcized. Then he began looking at his nose in a slightly different way. I asked him what more he saw and he drew a valley and a mountain representing male and female genitals. He veered off to smoking again: how did he know he could do it even when he was grown up? He played with two cars, one himself and a second to go with him for protection, making them explore caves, darting in and out. 'Hey! be careful. If you go in there you may never get out.'

Soon after this he came in spitting on his fists in preparation for a fight. This he enjoyed very much and a few days later he did actually have a fight with a boy who had for some time been teasing him a good deal. He related this in a delightfully nonchalant manner.

He had one final gesture of pushing his tongue out forcibly between his teeth and when I interpreted this as coitus he raised his chin and combined with the gesture a sound unmistakably representing flatus in defiance of a now reasonably comfortable if still forbidding world. He was pleasantly shocked by the interpretation whose acceptance seemed to close the door on the world of unreality.

He had by now entered with zest into school activities both in the class room and on the playground. Reports from the family were equally satisfactory.

In my opinion, the belief that child analysis is entirely different from adult analysis is entirely erroneous. This child's analysis is presented to document this belief. A child, as an adult, must express himself according to his ability, and being ordi-

narily more active and less articulate than the adult more clearly reveals himself through activity. However even the adult who has almost invariably become strongly inhibited in action reveals much in his mannerisms and tone of voice. We might say the adult plays with words as the child plays with clay and blocks. In this case of an intensely inhibited child, he began with words and only as he became freer did he begin to play and then in measure with the emerging material.

There are four factors significant in the analytical relationship which are applicable in everyday child-adult relationships.

(1) This patient's recollection of events without affect which is so pronounced in psychotics is very common in normal children; but in the normal child it is readily given up when conditions are favorable, whereas with the psychotic, reality has been abandoned. This is an important factor in the education of the child to whom there is commonly presented so much of devitalized material which produces anxiety that results either in an apathy towards learning or an anxious pursuit of knowledge in the hope of eventually finding out the truth. Many parents speak of their children's lack of interest in sex, or general lack of curiosity, whereas others complain of endless pointless questions or of what they call unanswerable questions. Questions resulting from anxiety are approached cautiously as this patient so well illustrates—beginning at a safe distance and advancing to the real point only when there is adequate reassurance. This anxiety is well founded. If the parent or teacher were himself not afraid why would he suppress the curiosity and withhold the information? Alan, eager as he was to learn, had to limit himself to facts and was greatly disturbed by any free play of the imagination. It seems not to matter much whether a normal child be given specific sex information if without anxiety it is made to feel free to follow its own impulses in a satisfactory way, whether directly or in a substitutive form.

(2) It is important to let the child alone when it does not indicate need for help. While things are going well it needs no help and prefers to work things out by itself. Education

should be a guiding of creative impulses, and that is possible only where there is considerable freedom of action. There is commonly too much insistence upon rules of technique, too much helping and criticizing the child with the result that potentialities are frequently crushed.

(3) The free use of humor in this analysis made it possible to approach new material which would otherwise hold intolerable anxiety and also in reducing and constantly draining off fear of the analyst. This relieves the analyst's anxiety as well as the patient's and would seem to be valuable to cultivate in any relationship between child and adult for the same reason.

(4) The analyst goes on guard for the patient, holds off the enemy so to speak, thus allowing him to throw off his armor and be free to live out his fantasies, stopping from time to time for the reassurance that the analyst is still there, still friendly and serene. It is not necessary to understand completely and certainly at times not necessary to understand at all what is actually going on, but if analyst is not anxious neither will the child be. The parent or educator in his insistence upon too much supervision, too much prying into the child's affairs, may well cease to be protector and become a persecutor.

THE INFLUENCE OF PSYCHO-ANALYSIS IN EDUCATION

BY CAROLINE B. ZACHRY (NEW YORK)

In evaluating the influence of any new trends upon educational theory and practice, it must be borne in mind that organized education is a very ancient and massive institution. Its scholastic traditions go back to the universities of the early Middle Ages. Much of this original heritage is still alive today, though for the most part it has undergone a slow and continuous change over the centuries. The inertia that is bound to be characteristic of such an old institution has been augmented by the growing size of the educational system. The schools of the United States, for example, are now attempting to serve thirty million children and to carry out this huge task as efficiently and economically as possible. School administrators are quite naturally resistant to any changes that may disturb or dislocate the existing organization of their schools, especially if the changes threaten to be expensive and the results uncertain.

It has required a tremendously powerful force to turn such a ponderous institution as the school system towards a new direction. That such a force has been at work is apparent in recent trends in education, and the extent to which Freud's discoveries are reflected in these trends is truly impressive—all the more so because this influence upon education is largely indirect. Freud himself did not attempt to formulate the pedagogical implications of psychoanalysis. In all of his writings there are few references to education. It was Anna Freud, a teacher as well as an analyst, who began the exploration of the direct application of psychoanalysis to children.

The progressive movement in education was begun under the influence of psychological knowledge that had no explicit connection with freudian concepts. Despite its historical independence of Freud, progressive education even at the beginning perceived a relationship sufficiently clearly to make it

possible for a few of the more daring progressive schools to experiment with the direct application of psychoanalytic principles to education. Significant as these early experiments were, the influence of Freud cannot be measured by their results alone. He has made a broader and less spectacular contribution to the development of progressive education, for his scientific method of studying the dynamics of behavior has mingled with other scientific influences to produce a far-reaching revision of the purposes and methods of education.

It must be admitted at once that the progressive movement is very unevenly distributed over the present-day educational scene. The traditional schools—and they constitute a majority—have resisted the impact of these new trends, and they provide a living illustration of scholastic traditions applied to the teaching of children. In these schools the pupils sit on seats fixed to the floor in even rows and listen to the teacher's presentation of the lesson and to the recitations of other pupils. The class is expected to be silent and attentive. Long experience has shown that under these conditions restless hands are apt to get into mischief, and various rituals have been adopted to prevent this: in some schools pupils fold their hands and place them on the desk; in other schools the arms are folded, and the hands rest on elbows in full sight of the teacher.

Learning is assumed to be a purely conscious intellectual process. The teacher's main function in this process is to impart information making sure that her pupils retain a certain minimal percentage of it before they are passed to the next grade, where the same procedure is repeated with a somewhat more complex subject matter. The content of each lesson is prescribed in advance, and the entire syllabus varies little from year to year. There is no reason to have a flexible curriculum, for the members of a class are uniform in this educational setting. The teacher is expected to have the same relationship to each of her pupils; she is an impersonal authority, setting their tasks and giving them their proper rewards in the form of grades. Homework assignments and grades are her only contact with the pupil's home. It would be in bad taste

for her to go beyond this and to pry into the family affairs of her pupils.

A vastly different picture is presented by the progressive schools which have made radical departures from the scholastic tradition. Even in the physical setting of their classrooms, they offer a striking contrast to the traditional schools. Chairs and tables are movable, so that they may be arranged by the students in any way that best suits their purpose. There are few or no prescribed textbooks. Students are able to consult all types of books which are within easy reach on shelves in the classrooms and in the school library. But the materials of education are not limited to books. Art materials and machine shop tools—paints and brushes, crayons, fingerpaint, clay, stage equipment, wood, hammers and nails, lathes, automobile parts—are made available to students.

The rigid and restrictive formalism of the traditional school is replaced by a freer and more intimate atmosphere. Students are expected to move about and talk, just as they would elsewhere. Instead of working on assigned lessons, they work on individual or group projects which they themselves have had a voice in selecting. Men as well as women teachers are there to help students plan their work, to give advice and encouragement, and not merely to provide information that students can easily obtain from books. The teacher's main task is to enlarge his understanding of each child for whom he is responsible, so that he may guide his students most effectively towards the type of work that will contribute to their personal growth and development. To gain such an understanding, the teacher must go beyond the school environment and acquaint himself with the parents and the homes in which his students live. Often he will meet the parents; informal teacher-parent contacts are encouraged by progressive schools. Visiting teachers, social workers, school doctors and nurses, and people from agencies coöperating with the school can provide him with additional information about each student's home and early history.

At first glance it may be difficult to see any clear evidences of freudian influence in this progressive school picture. Psychoanalytic terms have been deliberately omitted from the description, for this is the way progressive teachers and educators would themselves describe their practice. Many of them have some familiarity with Freud's concepts, but they do not apply his terminology to their methods of teaching. They have developed a special terminology as part of their own educational theory. They speak of the child's need to find a free outlet for emotional expression and of the school's function to direct these impulses into creative channels; they do not use such terms as *id* or *sublimation*. They are concerned with the problem of having the child assimilate, not merely acquiesce to, the authoritative demands of his home and his cultural environment, and they are even more concerned with the related problem of integrating these authoritative forces with the child's impulse to expression; but they do not refer to the processes of *introjection* and *ego formation*, nor to the dynamic relations between the *ego* and the *superego*. Many educators realize that the teacher assumes the rôle of a parent in the child's eyes and that because of specific child-parent relationships some students will react more favorably to women teachers and others to men teachers; but father or mother *surrogate* and the *transference* are not part of their vocabulary.

The absence of psychoanalytic terminology in education is a superficial matter, for many of the basic principles of progressive education are entirely consistent with Freud's contribution to the understanding of psychic development. But this difference in vocabulary is a matter of practical importance. It has been responsible for a good deal of misunderstanding between analysts and educators. In discussing psychological problems with teachers, the psychoanalyst will frequently arouse their antagonism if he employs the terms that he is accustomed to use, even though their insight into the motivations of children would seem to promise a better rapport.

This paradoxical situation, in which the principles implicit in psychoanalysis are accepted but its explicit theoretical con-

tent is rejected, is not confined to teachers, and it is nothing new in the history of psychoanalysis. The same situation can be found among social workers and psychiatrists, as well as among people who are not professionally concerned with psychological problems. Freud's ideas have so thoroughly pervaded the present-day conception of human behavior that his distinctive contributions cannot be easily identified. Teachers, like many others, are unaware of the source of their approach to human problems. It is also understandable that teachers should find it an unpleasant experience to have some of their own unformulated beliefs and educational philosophy handed back to them with freudian labels. They are inclined to resist any attempt to identify them with psychoanalysis, which is still vigorously rejected in many educational circles. It is still new and unfamiliar to the majority of teachers. Only in the last few years have undisguised freudian concepts been introduced to them. Child guidance clinics have been particularly effective in focusing the attention of teachers upon the freudian implications of their work. Because these clinics can work in close coöperation with schools, they are in a position to deal sympathetically with teachers and to bring about a gradual understanding and acceptance of psychoanalysis.

There are a few schools whose educational policy has been based, more or less frankly, on psychoanalytic principles, and these schools regard personal analysis as an asset in the teacher's training. But it is a significant commentary on the way in which influences operate that the direct application of a psychoanalytic approach in these rare schools has raised special problems and difficulties. Though the aims of progressive education and of psychoanalytic therapy converge at many points, there are inherent differences between the school setting and the therapeutic situation, differences which at first could not be appreciated by schools experimenting with psychoanalysis. They tended to overlook the fact that the school is a society within a society. Whatever purposes and methods it may adopt, the school has an unavoidable responsibility to help the student continue his growth and maintain his normal life

course with age-mates and adults in the school itself, in the home, and in the wider social setting.

Educators in experimental schools were keenly aware of the presence of incipient neuroses among their students, and this sensitivity was a welcome departure from the general educational practice of ignoring neurotic symptoms. Their emphasis upon the psyche of the individual child, however, led them to isolate the potentially neurotic student and to give him a sheltering environment in his school experience. When psychoanalytic therapy could not be provided for him at the same time, the result of this sympathetic procedure was to reinforce his neurosis without providing any constructive measures for correcting it.

These schools also had the policy of providing students with an environment in which they were encouraged to give free and uninhibited expression to their impulses. This policy was as much a reaction against the repressive tactics of the traditional schools as it was an attempt to employ a psychoanalytic approach, but the results were not entirely encouraging. In an analytic treatment, the difficulties of dealing with the aggressive impulses of a single patient are often severe enough, but the dangers of outwardly as well as inwardly directed aggressions are enormously increased in a school, where individuals are dealt with in groups. Quite aside from the physical injury that might follow when twenty children in a machine shop released their aggressions, the encouragement of free impulse expression had some serious psychological dangers. In an environment of noisy confusion and in a program without coherent plan or continuity, the student's experience could easily have a disorganizing effect upon him. Such a school setting might also stimulate conflicts in the student, for the home and the out-of-school environment could not be expected to view the child's externalized impulse life with as much sympathy as the school. During the early stages of an analysis, similar disturbances and conflicts are of course aroused; but the analyst has a degree of control over the patient's environment and over the subsequent course of his inner life that it

would be undesirable for the teacher to attain. To precipitate psychic disturbances is not the final goal of either education or psychoanalysis, and unless the school has the authority to protect the student against himself and others while, at the same time, it is trying to help him solve his problems, the results may be dangerous for the student.

In spite of some of the mistakes made by the psychoanalytically oriented schools—mistakes which are more apparent now than at the time the schools were first developing their approach—these courageous experiments were a necessary part of the educational movement. Like the early psychoanalytic studies, they overemphasized the individual as an isolated organism; and just as psychoanalysis was benefited by the cultural perspective that Freud helped to supply, these schools were also in need of a cultural revision of their policies. They played a useful rôle in progressive education as a corrective to the extreme sociological trend that took place simultaneously and on a more extensive scale.

Sociologically minded educators viewed the school as an agency for socializing the individual child, for making him aware of his responsibilities and rights as a participant in a changing social order. These educators were political and economic liberals who recognized that the traditional schools, by turning the student's attention exclusively to the past and to disciplines that no longer had any vital function in modern life, were failing to provide the student with any realization of his place in a rapidly changing culture. But in trying to correct the reactionary social influences of traditional schools, these educators overlooked the significance of the student's personal life, in much the same way that the psychoanalytically inclined educators overlooked the significance of the student's social life.

Enough has been said to make clear that the progressive movement in education is not a uniform one. It is made up of many trends and countertrends, many bypaths and pockets which are all united, however, in attempting to correct the deficiencies of traditional education. Beneath its eclecticism

the progressive movement is based upon certain guiding concepts which are similar at many points to the principles of psychoanalysis. And, what is more important than these similarities, progressive education is moving in a fruitful direction: the resistance and hostility to psychoanalysis as well as the overenthusiastic desire to make the school a kind of superficial psychoanalytic laboratory are being replaced by a sober attempt to understand the findings of psychoanalysis and to put them to practical use under the special conditions in the classroom.

To appreciate the vast change that psychoanalytic concepts have made in educational thinking, it must be realized that even the most elementary psychological knowledge concerning individual behavior and growth could not easily penetrate the school in its academic form. Only psychological studies which promised to increase the rate of learning and the retention of learned material could influence the traditional school which was organized to handle immature human material in an undifferentiated mass. It was consequently a startling innovation when John Dewey first pointed out that students were individual human beings undergoing rapid development and that the school could serve the function of contributing to this process of development. He managed to convince educators of the school's responsibility to the child as a developing personality, and his influence gave impetus to studies of individual school children. The attention of teachers began to shift from an exclusive concern with efficient methods of teaching separate units of subject matter to an interest in the constructive possibilities of the school experience for the growing child.

This emphasis upon the individual made it apparent to educators that the emotional life of the child had to be taken into consideration. They noticed that the child learned better when he liked the subject he was studying. Some of them even went so far as to point out that the child learned better when he liked the teacher. But during the early stages of the progressive movement the implications of the teacher-student relationship could not be successfully explored. Training

schools for teachers are only now beginning to realize that their first task is to select prospective teachers from among those who are free of threatening neurotic conflicts and to discourage others from entering the teaching profession. Many people have been attracted to teaching because of its potentialities for satisfying neurotic needs; in the teacher's rôle, emotionally immature persons are given the opportunity to compete with the child's parents for his affection, and this is a situation fraught with disaster, particularly for the young child and the adolescent. The training of teachers is beginning to include individual guidance work that will enable them to gain some insight into their own personal lives and to enter into constructive rather than demanding relations with students. This type of training is gradually taking its place in teachers' colleges along with training in subject matter and classroom techniques which formerly comprised the entire program of teacher education.

With the widespread introduction of mental tests in schools, educators observed that some pupils with high IQ's often did poorly in their school work, that others showed marked variation from time to time in both their intelligence quotients and their school work, and that for still others a series of mental tests was a disturbing experience which affected school work adversely. There were obvious emotional factors entering into mental testing and resulting from it. The term *motivation* gained currency for many years in educational literature, and it expressed a tacit recognition of the school's responsibility for dealing with the emotional attitudes of the pupils. In some progressive schools, the desire to influence the pupils' attitudes made no essential change in educational policy which was still aimed at developing only the student's intelligence. It was believed merely to be necessary to control emotional factors that might be presumed to interfere with the student's intellectual achievement.

In other schools, however, the educational process was seen in a new light. The practice of directing the child's entire energy towards intellectual achievement, it was realized, too

often disturbed the process of balanced maturation in the child; in fact, the intellectual results, as the school measured them, might be as undesirable as the emotional consequences. It became clear that the child was an organic unit which could not be divided into emotional and intellectual compartments. If the school was to aid the development of the child, it must deal with the whole child.

In spite of their realization that emotional maturation was an integral part of growth, educators tended to confine their understanding to the conscious life of the child. The sociological educators, for example, not only provided the student with a broad curriculum in the social sciences, going far beyond the perfunctory academic courses in civics and citizenship, they also encouraged him to participate in the affairs of his own community, to make first-hand studies of other communities, and to take the initiative in organizing the group life of his school. Their aim was to help the student achieve a sense of security and purpose in a democratic way of life. *Learning by doing* became a slogan in education. It implied that direct emotional participation was an essential and legitimate part of learning, and not merely a troublesome force that had to be mitigated or steered in the direction of intellectual achievement. But it also implied that learning was motivated by a conscious goal, that it could take place most effectively when the student bent his energies toward a conscious purpose. Unconscious motivations, if they were recognized at all, were felt to lie outside the scope of education.

The necessity of educating the whole child, emotionally as well as intellectually, socially as well as academically, brought with it a corresponding necessity to expand the school services beyond the classroom. To some extent this expansion had already been foreshadowed in the traditional school. Its doctors and nurses, truant officers, and staff in charge of extra-curricular activities, despite their limited functions, paved the way for other nonacademic services on the staff of the progressive school. Social workers and persons trained to investigate the student's home environment and out-of-school activities

made their appearance. And in a few schools, trained and analyzed guidance workers were brought in.

The nursery school has been particularly effective in demonstrating the value of these augmented school services and in stimulating educators to give attention to the rôle of the unconscious in the process of growth. With the establishment and development of nursery schools, the significance of parental and home influences upon the child's development was too obvious to be overlooked. In order to guide the child towards integrated growth, the school established close coöperation with the home. Nursery teachers or special members of the staff often worked directly with the mother and, as far as possible in our culture, with the father. An estimate of the intimate home environment was included in the education of the child. Within the school itself the child was given an opportunity for free expression in such forms as water play and clay rolling, as well as for culturally approved achievement, from learning to wash its own hands to learning the numbers and letters.

Nursery schools have been relatively late additions to the educational system. With their fresh start they have had the advantage of being able to implement the more recent knowledge concerning child behavior and development, without struggling against the confining traditions and organization of the academic school. Elementary and secondary schools have had greater practical difficulties to surmount. But they are in a better position now than ever before to benefit from the accomplishments of the nursery school and from their own progressive experiments in education. Their major problem now is to apply their many facilities and resources with a sense of perspective, avoiding the enthusiasms that have so frequently led to a single-minded emphasis upon this or that aspect of the educational process.

That the school must deal with the student as a social being has been amply demonstrated in progressive education. If the student is to be understood in his social rôle, information about his out-of-school environment and activities is essential to the school. If he is to be developed as a social person, it is also

essential that the school help him to face democratic living with some degree of security and courage, especially in view of the threatening demands that are likely to be made upon him in the future.

The values of the curriculum and of special subject matter fields have also been demonstrated in progressive experiments, but the total curricular function of the school is not as clearly understood as its societal function. There has been a tendency, as a reaction against the subject matter emphasis of the traditional school, either to regard subject matter as of minor importance or to give undue prominence to some single branch of the curriculum—the social sciences, fine arts, handicrafts, manipulative activities, or vocational studies. Each of the subject matter fields has special values to offer, but these values must be appraised in terms of their contribution to the individual child's development. Social studies are not equally good for all students, nor good for the same reasons. Through social studies one student may increase his sense of cultural participation, another may gain a satisfying release from narrow home ties, another may react with an overwhelming sense of oppression at social injustice, and another may respond with fear and confusion at the vast complexity of the social world. Biology may mean an opportunity for controlling small live animals to some students and for exploring sexual problems to others. These special values can be dealt with to some extent on a conscious level in factual presentations and in class discussions, but there will be problems raised in class that the student, particularly the adolescent student, will wish to take up privately with a trusted adult in the school.

Often the teacher who has established an intimate relationship with the student can act as a guide and help him reach some degree of insight into his personal problems.¹ If the teacher is unable to deal understandingly with a student's problems, or if more intensive aid is needed, the student can

¹ For a fuller discussion, see *The Educative Process as Guidance in Democracy and the Curriculum* (Harold Rugg, editor). New York: D. Appleton-Century Co., 1939. pp. 435-454.

be put in the hands of a trained guidance counselor who works in coöperation with the teacher. If the student has reached a condition of serious disturbance, however, his case should be referred to a therapist outside the school; mutual coöperation in such cases is essential.

The distinction between therapy and educative guidance must not be drawn too sharply. The child and the adolescent are under the strains of growth. The rapid changes that are taking place result inevitably in some disparities of balanced adjustment and, what is often distressing to teachers, frequently manifest themselves in symptoms which in an adult would be indicative of a neurosis. Sudden regressions which are often observed in children reacting to the arrival of a baby brother or sister in the family, for example, do not necessarily indicate the onset of a serious disorder. Except in special cases which present other complications, such regressive symptoms run their course and soon disappear under guidance in the school and the home.

Guidance measures in education are essentially preventive. They seek to keep the emotional growth process in continuous development and to prevent impeding disbalances from assuming grave proportions. Psychic disturbances in children and adolescents seldom take the form of a relatively static neurotic adjustment, for the growth process itself tends to keep the child in a state of flux. It is the preventive rather than the curative application of psychoanalytic principles that is especially adapted to the educative process.

Because of their related functions, education and therapy become interdependent in practice. On the whole it seems best that psychotherapy be undertaken separately from the school when parents can afford it, or by the school psychiatrist. It seems advisable that the school psychiatrist should see the child in his private office or in the child guidance clinic where such a clinic is available. The referral itself may be suggested by the school doctor or other members of the school staff who are in a position to observe continuously the behavior of the pupil and to note any persisting disturbances that seem to indi-

cate a disorganized or neurotic state. In a good guidance program it is essential that the school doctor and the school psychiatrist be an integral part of the staff with time allowed for frequent conferences both with individual teachers and groups of teachers. The outside therapist needs to maintain contact with the school if he is dealing with children or adolescents. His coöperation with the school and his understanding of its procedures and purposes are essential factors in his treatment of children attending schools. A pupil undergoing therapy is still responding to the influence of the school. The therapist can help to adapt this influence to the course of treatment by interpreting the pupil to his teachers and giving them some insight into his behavior. The information will also help the school, for with it teachers can plan a more effective educational program for the pupil.

Such coöperation has a value beyond the immediate purpose of treating a particular case. It offers a direct means of furthering a mutual understanding between the therapist and the educator, each of whom is concerned in his own way with the mental health of individuals under his care.

THE SCHOOL AND CHILD GUIDANCE

BY EDITHA STERBA (DETROIT)

It is important for the psychoanalyst who works with children to participate in child guidance in order to make his psychoanalytic experience accessible to a larger number of children than his few patients in analytic treatment. Educators often seek consultation for guidance in instances which present more difficulty than their training, experience, insight and ability have equipped them to handle. Such advice often requires a series of interviews, the number corresponding to the complexity of the problem and the needs of the child. In the following pages is reported a detailed account of an educational problem presented to a teacher who worked in coöperation with a child analyst. It is hoped that this report will illustrate the method of such work.

In active child guidance work, advice and help can not be limited to the child. The environment of the child and the members of the child's family need to be included in the educational activity.

Ten-year-old Frida attracted the attention of the teacher at the beginning of the school term because when she was called upon to recite, she took so long to answer that the teacher could not wait for her reply. It was apparent that the child was searching perplexedly for each word. Her face was expressionless and at the slightest interruption she would stop talking altogether. She hesitated so long in answering even the simplest question that it seemed as though she did not understand. Asked, 'Why have you forgotten?', after a seemingly endless pause she would make some such evasive answer as, 'Because I had too much to do'. One had the impression that she was emotionally disturbed and wanted to say something entirely different. She was too quiet, serious, apathetic, and appeared not to want to have anything to do with the other children.

The teacher arranged an interview with her parents and learned that Frida was an only child, the parents living in adequate though modest circumstances, and appearing to be very much concerned about the child's welfare. The father gave the impression of being intelligent. He interested himself a great deal in the child's home work and reported that she was always occupied with school work or reading her school books. She was obedient, willing to help with the housework, and gladly entered into any activity with her parents. As a small child she had been quick to comprehend and was very vivacious. Her father, greatly disappointed that the school reports were so bad, took it very much to heart that she was not a better student. He believed the way to handle the child was to be strict. He recommended that the teacher be severe with her. The mother, much less intelligent than the father, seemed kind, and had only good things to say about the child.

The teacher then arranged to talk things over with Frida. With this uncommunicative child who appeared to have very little contact with anyone, and who besides was excessively inhibited in talking, it was important to be especially careful during the first interview. The teacher wanted if possible to correct this child's difficulties of which she had not as yet a clear picture. She recognized the necessity for avoiding anything which might make her distrustful. She asked what Frida believed prevented her from getting on in school, not mentioning her inability to recite. 'I am afraid to talk because the children will laugh at me', she said. 'But they would not', the teacher objected. Said Frida, 'If I can't say it right, then I won't say anything'. The teacher reassured her and suggested that to become more sure of herself she might try to recite aloud at home. This suggestion touched something important to the child who began to speak freely, though indistinctly and in broken sentences. 'Yes, but at home I can't. Father won't allow it, and then he scolds me. I am often not allowed to study at all if I don't know it right away; then he says I may not do the work, and I have to come to school without it. He often throws the books on the floor when he is angry, and then

I am scolded in school for having creased the pages, and I don't like to say Father did it. In grammar school he even tore a book. If I can't do my work, he always says it's a crime that I have to be helped. He says, "Don't bother me; other children are able to do all that alone". Asked about her mother she answered scornfully, 'She slaps me and says the same as Father. Father scolds, and Mother slaps me. They are good to each other but they don't talk to me. I don't talk to anyone either.' 'Why?' the teacher asked. 'I have no one', answered the child. The teacher said, 'You may talk to me about it, and tell me everything you think makes things go so badly for you in school'. Frida said nothing, but her looks expressed agreement. Questioned whether she loved her parents, she denied this energetically. The teacher then related how nicely her father had spoken of her. She retorted, 'Then they shouldn't have sent me away to camp where I wouldn't have learned anything if there hadn't just happened to be a teacher there'.

This is what had occurred. While she was in grammar school she was once sent during the school term to a camp. She had interpreted this as a plan of her parents to place her where she would be unable to study so they could later scold her more for her failure at school. By chance she was able to study there because there happened to be a teacher who gave lessons. 'When do you believe', the teacher asked, 'did your parents stop liking you?' 'Ever since I have been going to school. In the first grade I could study very well [this checks with her school records], and then it got worse and worse and my parents were so angry they both scolded. Then Lina came and because of her I had to go away.'

When Frida was in the second grade her parents undertook to care for a child whose parents were living in extreme poverty. This child did better in her studies than Frida. 'I was always blamed for everything.' The father kept saying: 'Look how well Lina learns her lessons. She used to go to school in the country and didn't have as good teachers as you. There is no need for you to do so badly at school,

and I would be ashamed if I were you.' 'They always took Lina's side', said Frida, 'and she told lies about me, and Mother and Father always stuck up for Lina. Once when Lina told a lie again, I beat her until she was black and blue. Then Mother and Father sent me to camp and Lina was allowed to stay home. Since then I don't speak to them any more. I didn't come back from camp until Lina was gone. But Mother and Father treated me the same as before I went away.'

The teacher learned later from the parents that Frida had been sent to camp by a social welfare organization. This had not happened immediately after the incident Frida mentioned, but was still during the time the foster child was in the house. Believing their own child well cared for, the parents out of pity had kept the foster child for some time longer.

The teacher proposed that she speak with Frida's parents and explain her problems to them, but Frida was so positive in her refusal that the teacher agreed that she would not.

The introduction of a foster child in the house was of utmost importance in the development of Frida's conflicts. A large part of her learning difficulties can be directly ascribed to the disappointment and neglect she experienced. She hated her parents because they took another child to live with them, and could not forgive them for sending her away alone to a camp. She refused to study in order to hurt and annoy her parents. It would be tempting to attach to the incident of the foster child the total responsibility for all of Frida's difficulties; however further investigation made this assumption doubtful. Also, why could Frida talk only when she was sure that what she was going to say was correct? Why was she enraged by her father's criticism if one assume that she neglected her studies in order to disappoint him? And from the impression the teacher received from her interview with the parents, she found it difficult to imagine that they could have treated the child so badly.

As a result of the good rapport established between the child and her teacher, Frida began to study and to do her homework without worrying whether or not her father was angry. One

of the good students of the class was delegated to coach Frida. Frida was elated and remarked, 'I tell father that I will be punished at school unless I do my homework and study hard; then he has to let me study'.

For some time thereafter, the teacher learned little more about Frida's problems. Frida got up early one day in order to do her homework which she had not been able to do the day before because she had had to go out with her father. Her father was angry and threatened to spank her because she was again working such a long time. 'He did that all the time', she reported, 'when Lina was still with us'. In those days she had been unable to sleep in the early morning 'because Lina was allowed to sleep in bed between my parents, which wasn't at all necessary because there was a couch'. Her attitude of hatred towards her parents remained unchanged; she would not permit any attempt to bring about a reconciliation. Her confidence in the teacher continued to grow, revealed mainly in increasingly frequent complaints about her parents.

The most striking change was in her studies. She became coöperative, able to think clearly and to recite at first only when she was alone with the teacher, and later in class she was able to answer difficult questions correctly without pause or hesitation. Her facial expression changed, became more open and free; she was gay and seemed to enjoy talking, looked the teacher in the eye when she said good-bye which she had never before been able to do. However she was not yet friendly with her classmates. She was happy over the progress she made in her studies. She admitted that her father did not scold so much any more when she studied, and a little later confessed that she often neglected to do her homework altogether.

At Christmas time she was very unhappy. She was sure that her parents would not give her any presents. The teacher was able to persuade her to buy a trifle for them. After Christmas it turned out that she had received many more presents from her parents than even the teacher had expected.

During this time she related incidentally that her mood was sometimes determined by her dreams. If she dreamt that she

had teased or tormented someone, she was happy all day. Her bad dreams were similar—that someone is poking her, or that she is sinking under water and an octopus is eating her, or that she is going to hell.

Frida related one day that her father did not want her to continue studying with her classmate because she came home too late. Urgently in need of help in order to make up the many gaps still remaining in her knowledge, it was unavoidable that the teacher speak with her father and make clear to him how necessary it was that the children study together. At first Frida would not hear of such an interview, but finally consented on condition that the teacher tell her everything that was discussed; furthermore the teacher was to present five definite problems and tell Frida what the father's reaction was in each case: first, whether her father would permit her to continue working with her classmate if she buys a notebook in which the classmate's father would record how long the two had studied together; second, her father should be made to realize that other children study together too; third, he should be made to realize that she was very diligent; fourth, that she is not stupid and waits long before answering only in order to avoid mistakes; fifth, the teacher should try to find out why Frida has remained the only child, and whether the father would not have preferred to have a boy.

The teacher agreed and the father consented to Frida's knowing what he told the teacher. He was opposed to Frida's studying with her classmate because he thought that she was copying everything from her. He complained that lately Frida had been very rude and aggressive. He claimed that he never spanked her, but that her mother did once in a while.

Frida was not scolded by her father as she had expected she would be but received permission to go skating. Satisfied, she told the teacher, 'I really was scared because of my screaming. I've been screaming a lot and shout at everybody who won't do what I want. When I was little I always used to bang my dolls on the floor, and later I used to beat up Lina and to fight terribly with my cousin. I often get so mad that

I have to yell; otherwise I would burst.' These aggressive tendencies had heretofore appeared in her dreams. From the material which Frida brought the teacher we do not learn much that is new but it makes possible some corrections. The father had not been arbitrarily unjust from the start and forbade her studying. She herself had reported that she neglected to do her work. She had noisy fits of rage if she did not have her way. In other words, she did everything she had accused her father of doing. From the questions she asked the teacher to put to her father, it was apparent that she attached great importance to his opinion; she did not want him to think that she was stupid and lazy, and feared that he did not love her.

Her obstinacy, apparent stupidity, and the seeming lack of contact, were manifestations of her opposition in which the child took refuge when she found herself unable to give vent to her aggressions. After she found she could talk freely with the teacher she relinquished her obstinacy in school, and her aggressions became released at home. She did not want the teacher's sympathy and good opinion of her spoiled by learning from her father that she was so badly behaved at home. It was therefore important for the teacher to refrain from talking with the parents in the beginning of the relationship; otherwise Frida might well have taken the same obstinate attitude towards the teacher that she had towards her parents.

Sometime after Frida had begun making good progress in her studies and everything had become easier for her, she came one day to complain bitterly to her teacher about a man teacher who, in her opinion, showed preference for some girl pupils and was not always truthful. She wanted to explain to him that he was wrong and it took great effort to dissuade her. Of each of the frequent classroom quarrels, she fanatically made it her business to get to the bottom, to find out who was right and who was wrong. She righteously demanded that justice prevail and that the guilty be punished—to the discomfiture of her classmates who objected and ridiculed her; moreover, she never missed a chance to complain before the whole class about her parents' injustice to her. But this did not interfere with

progress in her studies and her homework, and gradually she made up her deficiencies and could keep up with the work. During this period she did not bring any new material from which one could gain a clearer understanding of her difficulties, despite the fact that she had as much opportunity for talks with the teacher as before.

The dynamics of this behavior in school is as follows. Through her interviews with the teacher, her obstinacy at home had reverted to aggression and rage. She now began to act out those same aggressions in school. Her challenging self-righteousness and provocative manner were well calculated to create situations in which she would be judged to be wrong. Soon, to prevent disturbance of the class routine, the teacher would be compelled to curb her, and the beloved teacher for whom she had abandoned her obstinacy and with whom she now began to take unwarranted liberties, would be compelled to hurt and disappoint the child; then, one might assume, everything would develop in the school situation as it used to be at home.

Whenever one succeeds in resolving the obstinate attitude of a school child by retracing the emotional stages which anteceded it, one may expect that the child will then transfer the conflict which led to that attitude to the classroom. The ideal solution at this point would be to analyze the child. But aside from the fact that analysis is not always possible, an attempt should be made to handle such situations within the school. In this instance, in all probability, the relation to the teacher would have led to many conflicts and difficulties in analysis.

It frequently happens in the course of an analysis that a child will begin to act out its difficulties in the manner just described, using the school for the expression of its instinctual desires and conflicts. However, whenever a teacher has prepared and enabled a child to act out its conflicts, it is important that she should not be placed in a position similar to the parents, of having to restrain the child against acting out its aggressions. Since without analysis the material obtained is not sufficient to

enable one to explain to the child the significance of its desire to be aggressive, other means have to be found to help the child gain an understanding of its emotional impulses.

To have shown this child that her conduct would sooner or later meet with her teacher's disapproval would have had two disadvantages. First, the danger that the child would act out her aggressions with increased vigor at home. That would have been this child's reaction to the slightest restriction of those aggressions which she was just commencing to act out in school. Second, it would have become difficult or impossible for the teacher to retain the child's confidence. Frida's aggressions were too deeply rooted in her neurosis for sublimation.

The teacher therefore decided to attempt a compromise. Frida's class showed particular deficiencies in composition and spelling. It was easy for the teacher to add an extra practice period to the curriculum for those children who needed special work. This special class to which Frida belonged was given the task of writing a story about a little girl. It was left to the children to decide the type, content, and length of the story. Each story was to be discussed by the whole class. The children themselves decided that they would ask questions to be answered by the author about whatever they did not understand.

In the plan of this assignment was the idea of giving the child through the medium of an imaginative story a chance to express her aggressions against the parents, the teacher and her classmates. It was hoped in this way to learn a good deal more about Frida, and also to bring about a change in her behavior. The writing of the stories became the main topic of conversation for weeks and absorbed the interest of the children so completely that Frida's hostility became much less conspicuous.

As the stories were read and discussed by the children the teacher's position became more passive and neutral in relation to Frida who had to share her attention with the others in the group. Her story however aroused more interest than the compositions of the others which was a satisfaction to her.

Her story was interpretable to the last detail by her own comments. The children asked many significant and leading questions the teacher could never have asked and Frida answered quite naïvely and freely. The children were absolutely frank with each other, and forgot completely the presence of any adults because they were so entirely absorbed with the discussion of problems common to all of them at their stage of development.

The most important chapters of Frida's story follow word for word. Questions and answers of the children are inserted where they occurred. The story is the result of many hours of classwork carried on during several weeks.

MARIA

A CHILD'S STORY

I

A woman dressed in black came to Seehausen with a three-year-old child. She came to an inn called The White Pigeon. She went into the inn and asked whether they had a small room to rent, as she was all alone with the child. The innkeeper was happy to take her in and showed her to a room. It was very simple but kept very clean. Meanwhile, the little girl had fallen asleep. Her name was Lieselotte, and her mother's Maria Hochberg. The next day Maria Hochberg went into the kitchen to look for some breakfast. The innkeeper's wife asked Maria where she came from and why she was so sad. Maria Hochberg told her that her husband had died recently and that was why she had moved to Seehausen. They had been there a few days when they saw a carriage coming and there sat the King and Queen and their children. They had a son of thirteen and a daughter of seven years, called Hans and Lori. Lieselotte enjoyed seeing the carriage drive past every afternoon. Lori was very haughty and did not look at Lieselotte at all. Hans always looked through the window smiling. Lori gave Lieselotte the name beggar princess because she was always dirty and barefooted. When Hans smiled at Lieselotte, Lori would say, 'You are stupid; you are smiling at the dirty beggar princess'. Hans was very sad that Lori called the little girl such names. Maria

didn't pay much attention to Lieselotte. Suddenly Lieselotte ran out the open gate and Maria jumped up to rescue her. But Maria fell and the horses stepped on her head. Maria lay there as though dead but Lieselotte got up and tried to lift up her mother. She didn't have enough strength and had to leave her lying there. The King and Queen stepped out of the carriage, and Hans too. They carried Lieselotte's mother into The White Pigeon onto a bed. Hans took Lieselotte by the hand and said, 'Come, stay with me because your mother has a hurt on her head'. The coachman had to go and get a doctor. He came and examined Mrs. Maria Hochberg. Then he said, 'Maria has a concussion of the brain and probably will have to die'. Then the Queen said to Maria 'I am taking Lieselotte with us; she will become very good'. Then Maria asked for her child. Hans brought her in and Lieselotte was given one more kiss and then she had to go right out again. Lieselotte was hardly outside the door when Maria closed her eyes. The King and Queen cried hard. The innkeeper and his wife were very much worried about Lieselotte; then the King and the Queen rode with Hans and Lieselotte to the Palace.

Lori looked out of a window and saw that Lieselotte sat in her seat. She immediately said to her nurse, 'Look, the beggar princess is sitting in my seat'. The nurse watched with surprise as the King and Queen came into the room with Lieselotte. Lori said, 'What does this mean, that Lieselotte is allowed to ride in the carriage and is brought here to us?' The King got so mad at Lori that she stopped talking right away. Lori told the servants that the beggar princess was in the house. Lori took Lieselotte to be her own maid and she had to arrange the school books. Lieselotte studied much better than Lori. Then Lieselotte and Lori were sent to a boarding school, and here, too, Lieselotte studied better than Lori. There the beggar princess made many friends. The beggar princess was very musical; the singing teacher wanted Lieselotte to become a singer. Lori was mad at her because the singing teacher had given her a reward.

II

Now Lori was at home and Lieselotte was also at home. The King liked Lieselotte very much because she was able to do more than Lori. The King was afraid that if he sent Lieselotte away, the people would hate the King, and so he allowed Lieselotte to

stay with him. Once when he rode away with her and Lori had to stay home, she was in a rage against Lieselotte. The servants said of the beggar princess that she was now the most beautiful child in all of Seehausen. A servant said, 'beggar princess', and the King heard it. He asked who had started using the name 'beggar princess'. The servant said Lori had said it. So the King had her called to him and for punishment she had to stay home for three days. And every servant now said, 'Beautiful Lieselotte is the most beautiful in Seehausen'. Thus a day passed and it was evening and Lori and Lieselotte had to go to bed.

III

The next day, a horn blew. It was six o'clock in the morning. Lieselotte had to go to the King and also to Lori and ask why were you so angry with me yesterday. As she was very proud, she was too proud to answer, and she said, 'Get out of here, beggar princess!' She was very much hurt and went to the King who had Lori called to him and scolded her. Then Lori was in a rage and wouldn't say another word to Lieselotte.

IV

Now weeks had passed in which Lori acted toward Lieselotte as though she did not know her. Lieselotte felt hurt that Lori was so nasty and always called her beggar princess. Now that the King had heard that word he was very nasty to his servants, paid them smaller wages and let them stay outdoors at night. The servants were angry too, and decided to leave the King's service. Each of them went to the King to ask for permission to leave, but in order to punish them the King refused to let anyone go. Then Lieselotte gained courage and was happy again because she knew that the King was so fond of her and did all that because he loved her. Thus a day passed, and they had to go to bed.

V

It was morning and Lieselotte got up. She went for a walk in the garden. When the servant saw that Lieselotte went for a walk and picked flowers, he reported it to Lori. She was angry and went to her father. He didn't say anything, just as though he had not heard her. She noticed that and went out in a rage, slamming the door behind her so that the whole house shook.

VI

Lori ran to her Mother and told her about her father not wanting to listen to her. Very much surprised, she went to her husband and spoke seriously to him. But he walked out without answering her. Now she became very anxious and called the servants and asked them whether they had seen her husband. Lori's eyes became swollen and Mama's eyes became red from crying. Then of a sudden a servant appeared very much disturbed: 'I saw His Majesty the King in the garden crying.' The daughter hurried in the meanwhile to her mother's room. She lay on the bed with her eyes closed. Then she ran out into the garden and saw Lieselotte comforting her father. But she didn't dare go up to him, instead she ran to her mother's bed: 'Come, Mother, Father is sitting outside on the lawn with Lieselotte'. The servants had to show them the way to the King. When they had reached there Lori asked, 'Father, what is the matter?' He was startled and answered, 'Because of you I am supposed to send Lieselotte away'. Lori became pale. She asked herself why in surprise; then it occurred to her that she had been talking about Lieselotte all the time and that that had made her father nervous. She promised Papa that from now on she would be obedient. She was very much surprised that he was going to send Lieselotte away because of her. Now she promised Papa that she would never call Lieselotte by that nasty name, beggar princess, any more. No sooner said than done and she grew to be much nicer. Her parents were surprised that Lori could change so quickly. She even played with Lieselotte without quarreling. The King was amazed that she took such a thing so much to heart. He promised her that if she would continue to be good, he would be nice to her again.

At this point questions were asked by the children and answered by Frida. Frida's revealing answers require no comment.

'Why does the King reject his own child because of Lotte?'
[The King only threatened to, but all the children reacted as though the threat had been carried out.]

'Because Lori was so mean and slammed the door when he talked to her and scolded her. That was why he didn't want to have anything to do with her. Other fathers would act the same way if their child was that disrespectful.'

'Why did her father treat Lori so badly?'

'Perhaps because by being strict he wanted to teach her to be good.' Whereupon all the children cried out in chorus: 'That's what made her so mean in the first place!'

'Why was Lori so mean?'

'Because her father didn't want to have anything to do with her.'

The children object: 'We would not have acted like that. We would have been sorry for the child who had lost its parent; it was very nice of the King and Queen.'

Frida: 'Lori was so spoiled because at first everything had belonged to her. If I had been Lori I would have fought until evening.'

'What had Lori been like before? Did she change just when Lieselotte came?'

'She was always naughty. Her nurse spoiled her in everything; she kept getting worse.'

'Why didn't her parents notice that Lori felt hurt?'

'She didn't show it.' Several volunteered: 'She didn't show it and because she felt hurt she was stubborn and then her parents were even more angry with her and then Lori became more stubborn.'

'Were the parents of Lori at fault?'

At this question Frida remained silent. The children undertook to answer themselves. No one was at fault they decided. The parents had given their promise and had to keep it, and Lori felt hurt and was spoiled. But the parents or someone else should have explained to Lori just what had happened; then everything would have been different.

VII

After Lori had improved, she played with Lieselotte and she told the servants they shouldn't call Lieselotte beggar princess any more because that hurt her father. The servants accepted her command and from then on her wish was carried out. Now the King went to the theater with Lieselotte and Lori had to stay home. The servants always said that Lieselotte was the most beautiful in Seehausen, and Lori was the next. Lieselotte was given new clothes and didn't have to act as servant to Lori any

longer. Now Lori and Lieselotte were given lady's maids who had to help them dress. They were the best of friends; they didn't quarrel any more, and they always ate together. The family was very much surprised at the friendship between Lieselotte and Lori. They were always walking together in the park, and riding with their parents in the city. The people were very much amazed that the King had another daughter. The King told the Count Franz von Lichtenstein about it. There was great excitement and parties were given. Lieselotte received many presents, from Lori a large bird called Pipsi. It was a parrot. It could repeat everything and became very trusting and tame. It repeated everything that Lori and Lieselotte said to it. Lieselotte was happy that her foster sister Lori didn't forget her. She received many valuable things and a golden ring, bracelets and necklaces. She became acquainted with the sons of barons and baronesses who were more interested in Lieselotte than in Lori because Lori was still very mean, disobedient and discontented. That was why the barons often didn't want them to play together because Lori was so mean. But now they all played group games and talked with girls and boys. Lori was very happy that Lieselotte was so good to her, for she gave her a ring and a chain. Lori was very pleased with it and showed it to the king. He asked in surprise from whom she had received the ring and the chain. She answered that Lieselotte had given it to her. He sent Lori out again. Then the King and Queen discussed whether or not Lori was obedient and learning well. The Queen was surprised when the King said yes, and she asked about the report card. Then the King was quite sad when he had to admit that Lori had a two and that Lieselotte did better than Lori. They were all surprised and asked how it happened that Lieselotte did better than Lori. The King just shrugged his shoulders and didn't answer. The barons and kings were very much surprised that Lori had a two and Lieselotte many ones. They played many games and finally the time came for them to go home.

One Sunday morning it was Lori's birthday. She was thirteen years old. In two weeks Lieselotte also had a birthday. They were allowed to wear their new dresses and also the new shoes. Barons and kings were invited. They brought Lori many presents; Lieselotte also brought Lori a present. She was very much surprised that her friend Lieselotte brought her a present. She gave

Lori a little dog called Flocki. It was three months old and not yet able to see.

Now they each had a big toy: Lori had Flocki and Lieselotte, Pipsi. Every day they played with the animals, and because of the animals, often didn't want to go to school. But one time the teacher came and said that Lori and Lieselotte hadn't been to school for three days. So the King said, 'Let me handle it. They certainly must go to school now. I will take the animals away from them and won't give them to them for five days.' When the teacher heard that, he went away satisfied. The next day, they had to get up at eight o'clock and go to school which was just on the next floor. Finally the lesson began; they had two hours of arithmetic. Lori didn't know anything and Lieselotte told her how to do the example, but she was so happy about it that she said it out loud. The teacher heard and asked what had happened. No one said anything, and then the teacher told Lori that she was a dumb-bell. Lori remembered it and told her father. He scolded the tutor; he was to be discharged. The teacher took it very seriously and never said that again to the princesses. Now he always had to call them highnesses. . . .

VIII

Then they went into a bedroom with the King and Queen and saw their aunt asleep. She was frightened but when she saw it was her brother, she whispered something to him. The Queen became very angry with the King for permitting his sister to whisper to him. She left the room, very red in the face, and the children followed her into her bedroom. The night passed quickly, and the children remained all day and night with their mother. They played together now, for they now had a bird called Pipsi, and a dog called Flocki. They played with them all the time. As soon as it was six o'clock in the morning, the King woke up, dressed himself and went to his wife. She was awake but she wanted to frighten her husband. He sat down near her bed and waited until she would wake. Then the children had to leave and go into the garden. This they did, and he sat in the armchair. Finally she opened her eyes and looked about her. The King was very happy, and told her the truth about what his sister had said: 'She wanted you to leave the country because she would like to be in power and rule the land'. He had, however, expected an answer. She gave none, and he left the

room in silence. She packed all her things and left without saying good-bye. She had a spot on her foot which one could see through her stocking. The next day the King went to her room to see what had happened to his wife. When he opened the door and saw that her bed was empty, he was terribly shocked and had a stroke. Thus the second day passed.

IX

Now the children were awake too, and dressed themselves and went to Papa. The sister was called Elfrieda and her brother the King, Karl. Karl didn't say anything to Elfi because she would only have laughed if he had acted troubled. He didn't let the children see how he felt either. Then one afternoon the aunt was walking with her nieces when she was met by a servant who told her that her sister-in-law was gone. At first she acted as though she were frightened; then she went home again and was happy that her sister-in-law was away now. The children didn't go to bed until eight o'clock because they didn't want to tell father that a servant had told them about it. They were very quiet until papa finally came in and saw that the two of them were crying. He approached them slowly and then more and more quickly until he was finally at Lori's side. He asked her very softly what had happened. Lieselotte kept pointing at Lori, and Lori at Lisl, because they couldn't say it; they were too much upset. Finally Lieselotte went to him and offered him a seat. He was glad to sit down because he was very nervous and excited. What Lori said was right so Lisl was quiet. Lieselotte began to tell what she had seen and heard. She said that she had seen the queen packing, and then she drove out of the gate. He was very much upset and once in a while closed his eyes in pain. She said that his wife had said that if she told where she had gone, Lieselotte would never get anything more from her, and she would throw her out. He got up from the chair and went out in misery.

X

Now the two girls were alone and father was gone away. But he came once more to Lori and Lieselotte and gave them the kingdom. He took fourteen servants along, and had his clothes and gold packed, and had his horses harnessed and hitched to the carriage. He got in and rode away. The aunt lay in another

room and heard what Lori and Lieselotte said: 'We will tell our Aunt that she must leave our castle and follow her brother.' They told her just as they had thought it. Aunt Elfrieda also left the country, took with her her servants, clothing, horses, and her gold. She wanted to go to her brother and have him become her husband. She gave the children two more dresses and some candy. She took with her four servants, a coachman, and six horses. She also gave them a poem that they should learn and always say whenever they thought of their parents, Aunt, and Uncle. But Lori had too much to do now because she had to rule the land. Her brother Hans was far away and she didn't want to write him about it. Hans couldn't come home to them any more because he was across the border; besides he was already used to being alone. Now each had her own room and they lay down.

XI

The next morning Lori was up early and went into Lieselotte's room. She always asked Liesl what laws she should decree and what she should bring up for discussion in assembly. Then the mail came which told her that there was war nearby. She was very much frightened and didn't know what she should do. She also ran to Liesl and told her that there was war nearby. Liesl was also frightened and didn't know what she should do. Lori went to a servant and he was to tell the people that they should come to an assembly as quickly as possible. He had to blow the trumpet and beat the drum and call out that all the people should come to the king. Within half an hour everyone was at the gate. One pressed against the other at the doors of the gate. The servant ran into the garden and asked whether all the people could come into the garden already. Lori and Lieselotte dressed quickly and went into the courtyard. They wore their most beautiful dresses, and when the people saw that the King and Queen did not appear but only the two girls, they were delighted and completely forgot the war.

XII

After the war Lori and Lieselotte fled to Kaernten. When they were ready to leave they went to the station. People were very friendly to them. They bought themselves a castle and lived happily. In later years Lori was married and went to Vienna with

her husband. One afternoon when Lieselotte went for a walk she saw Lori and her husband in an auto. She ran out of the gate. Some time later Lieselotte was married too. They lived well, and then Lieselotte bought herself a castle. And they lived very well.

XIII

Lori went to Asia with her husband and Lieselotte went with her. Lori and Lieselotte had children now, and everything was going well for them. Their children were well; they had nurses and a tutor. The children were six years old now, and they went to the first grade. After some time they went to grammar school and they went on an outing with their teacher. After some time they didn't go to school any more.

The two girls of the story are clearly Frida and the foster sister—the nucleus of Frida's most important conflict. The King and Queen are, of course, her parents. It might be asked whether it would not have been simpler to have told the child in the beginning that all her difficulties followed the appearance of the foster child in her home with resulting hurt feeling and jealousy. Would not one thus have avoided the danger of her acting out her aggressions in school and have been spared the tedious work of weeks on the story and all the explanations of it? But two important episodes occurred during the course of the story showing that underlying this conflict was a deeper problem.

Let us recall the beginning of the story. In the first pages, Lieselotte's mother dies. The same theme is repeated later. True, the King follows her, but the mother nevertheless has been disposed of. One is reminded of Frida's comment about her parents: 'She always hits me right away, but she is good to father'. Although she was angry with both the parents, there was a decided difference evident in her attitude. It is interesting that the mother is punished by death in the beginning of the story because she was neglectful of the child.

The relationship between Lieselotte and Lori which corresponds to Frida's attitudes towards her foster sister, Lina, occupies the foreground of the story. Frida represents herself

as the real princess, Lina as the beggar princess. Lori is made to experience all that Frida went through. However from the very beginning, one notices that Frida is particularly interested in Lieselotte. The dislike which she actually felt for the foster child is only present in the beginning of the story when she has Lori make Lieselotte her servant. Later a slip of the pen gives us a clue to her inner attitude toward Lieselotte. A part of the third chapter reads: 'Lieselotte had to go to the King and also to Lori and ask, why they were so angry with *me* yesterday'. It should have read, 'with *her*'. There we see that Frida also puts herself in Lieselotte's place, the place of the foster child. Frida was so envious of Lina's advantageous position, of her ability to learn, that she had been unwilling to answer questions until she was sure that she was right.

She identifies herself both with naughty Lori who does all the bad things that she did, and with Lieselotte through whose experiences she feels all of her own wishes towards her father fulfilled. And when the King leaves the Queen without saying a word to her, finally to be consoled by Lieselotte, we may be sure that Frida's wishes go deeper than trying to attain Lina's advantageous position. Frida wants to supplant her mother in her father's affections; she wants to have him to herself. When the Aunt leaves to marry her brother as the story has it, this is Frida's own wish which in the story she has the Aunt fulfil—the Aunt who desires to marry the King after she has got rid of the Queen. The symbolism which introduces this incident is noteworthy. The whispered secret symbolizes the forbidden something between the King and his sister which is immediately understood by the Queen who becomes angry and leaves.

In the King's attitude toward Lieselotte, Frida states how she would like her father to act towards her. The King is particularly fond of Lieselotte, pays the servants less money because they call her beggar princess, does not believe any of the complaints against her, and gives her preference over his wife. Frida's disappointment and jealousy are the expression of demands impossible of fulfilment.

Lori is at first just as naughty and disagreeable towards her royal parents as Frida was at the time she began to write the story. At the point where the story reads, 'Because of you I am supposed to send Lieselotte away', there begins to be a definite change. Lori (Frida) promises to be better, and keeps her promise. There are no further quarrels between the two children and the Frida-Lina problem with its deeper significance in the relation to her father and mother, seems to have been eliminated. Indeed the end of the story, in which both parents recede into the background, the children themselves being the rulers, then marrying and having their own children, seems to fulfil all our expectations of what the normal development of the child-parent relationship should be. The relationship which had caused so much conflict has disappeared, and the œdipus complex has been overcome. Frida has come to the realization that a little girl cannot take her mother's place; she cannot get rid of her and demand her father for herself; but when she grows up she can marry and have children of her own.

The change in Lori's attitude towards Lieselotte occurs at this point because Frida has progressed to the realization that if she continues in her attitude she runs the risk of losing her father's love altogether, which is just exactly the opposite of what she had been trying to accomplish. As a solution to this problem, she affects a reconciliation with the foster child whom she had up to now considered as a rival, attempts to emulate her behavior, and by means of this identification, attempts to attract her father's love to herself. She is then able in fantasy to enjoy with the foster child all that she had so much envied.

The change of attitude in the story coincided with a corresponding change in Frida's attitude during and after the completion of the story. In addition to the story other events made contributions to this alteration.

Frida had been made a monitor of the class. One day she came to the teacher and said that she wanted the teacher to choose someone else for the position. The teacher asked her whether she did not feel sorry to lose that position of honor.

Frida was sullenly quiet. The teacher said she should continue to be monitor, and explained that Frida was unwittingly creating the same situation in school that had existed at home between herself and Lina. What was the reason she always managed to make herself feel misunderstood and neglected, and then react by being sullen and obstinate? 'Yes', Frida said, 'because I have a bad conscience; because I want everything for myself'. The knowledge she had gained from the beginning of the story without directly referring to it, enabled the teacher to show her that because of her guilty conscience about her wishes she designed such situations. This was tactfully repeated at every appropriate opportunity. That Frida understood and digested these explanations is recorded in the progress of the story.

The fundamental change in Frida's attitude must be due to the fact that the connecting incidents were repeatedly explained by the teacher. All changes for the better which appeared during the course of the story became part of her actual behavior. Frida continued to be a good student; her behavior at home and towards her classmates paralleled that of the reformed Lori of the story. She seemed to have no further need to act out her aggressions at school or at home. She was no longer sullen and obstinate, and the relationship to her teacher gradually became quite natural. Her teacher met with no difficulty in treating her as a normal child.

The primary cause of Frida's obstinacy which was expressed in her not wanting to talk with anyone because she was so angry with her parents, was the fact that her parents had so strenuously inhibited every expression of her aggression. Frida's solution was a sullen hatred of the world. But why was Frida so aggressive? We cannot derive the final reason for the origin of her aggression from this report. We know only that Frida was angry because a foster child came into the home, and that more deeply it reinforced a wish to be rid of her mother and have her father to herself. Because she had been a spoiled and an only child, this wish may have been particularly strong. In answer to a question Frida had said, 'It was the nurse's fault; she had spoiled Lori so much'. At a time when the

first difficulties arose and the parents were attempting to correct what they now recognized as the bad effects of having spoiled Frida, a foster child was brought by them into the home. What effect that event had, we have seen from Frida's report and her story. Her parents reacted to her fury with anger and attempts to correct everything with severity. Being sent to a camp, Frida interpreted as a punishment and a definite sign that her parents no longer loved her.

The important part that the teacher played is very clear and can be briefly summarized. At first she was simply passive and friendly, so that after a good relationship had been established, it was easy for the child to reenact in school the experiences with which she could make no headway at home. The friendly patience of the teacher which lacked any hint of severity or restraint, brought out the aggressions underlying the child's obstinacy. The writing of the story and the explanations which could be made because of it, achieved results. With it the teacher gave Frida the opportunity to abreact many aggressions within the story. It enabled her to show the child the important sources of her conflict and to help her resolve the conflict in the manner described.

From the point of view of the analyst, the report of this case does not tell much about the actual source of the difficulties in learning, or why they came about. We assume that from the beginning the child had a difficult situation to meet in her relationship to her mother and father, and that the appearance of the foster child gave the final impetus to the disturbance. A factor which remains completely unclear is the child's compulsive fanatic search for justice contained in her obstinacy, her aggressiveness, in her whole behavior. In order to clear up these points a psychoanalysis would have been necessary.

From the educational point of view it was sufficient for the teacher that she was able to help the child make such a good adjustment. One must however keep in mind that although the conspicuous conflicts and the resulting maladjustment were dispelled, whatever difficulties which were not understood, still remain.

Translated by MARJORIE ROSENFELD LEONARD

EDUCATION AS THERAPY

BY AUGUSTA ALPERT (NEW YORK)

While planning for mental health should be a requirement of all responsible education, the progressive type of school has a special responsibility in approximating this goal because in it the personality of the child is encouraged to reveal itself more completely and is, therefore, more accessible to mental hygiene through education. Though most schools gravely acknowledge this responsibility, opportunities for mental hygiene inherent in education have scarcely been tapped. The mental hygiene program usually operates more or less indirectly through teacher-child relationship, discipline, home-school relationship. This paper will discuss a more direct and more specialized use of the educational setting for the purpose of mental health.

'Educational group therapy' utilizes group discussion, so popular among children, as a therapeutic instrument. This was tried for the first time, under the direction of the writer, in 1935.¹ The symptom treated was thumb-sucking, manifested by six children in a prekindergarten. Because the results were excellent—all but one child gave up its thumb-sucking without substituting other symptoms and without any visible signs of anxiety—the writer proposed that such group therapy be put further to the test by:

- 1 Repeating the experiment with another group of children of approximately the same age for the same symptom.
- 2 Repeating the experiment for another symptom with a group of children of approximately the same age.
- 3 Repeating the experiment for another symptom with a group of older children.

All three tests have been made but only the second is reported here.

In this test of educational group therapy the symptom

¹ Alpert, Augusta: *Educational Group Therapy: An Experiment*. Progressive Education, March 1936.

treated was an exaggerated and unwholesome use of scatological language by a kindergarten group of a progressive type of school. This group experienced the usual release from anal inhibitions under a regime in which restraints were at a minimum, and the use of the toilet a social event. The result was a 'regression' to a marked interest in elimination and in talking about it. In this respect, developments ran true to form, except that the interest did not subside at the end of several weeks, as in other groups, but went instead from bad to worse. As a matter of fact, anal talk in this group went through several stages. At first the children took delight in verbalizing the previously forbidden words and did so extravagantly, without comment from the teacher. After the novelty wore off, instead of dropping the whole business as experience has proved is usual, they began to use anal terms teasingly and punitively, applying them to any child who was out of favor and to his or her handiwork: 'Duty Theda Rectum'; 'Billy's picture is a duty picture'; 'It's a stinky picture'. Occasionally the words were used with the same intent against adults. This type of teasing did much to undermine work morale, as well as to disrupt the social atmosphere of the group. In the next phase, the anal language seemed to have lost all poignancy of meaning. It began to be chanted more as nonsense syllables, seemingly without emotional tone, interspersed in all conversation. Verbal expression during this period thus appeared on a much lower level than the high average intelligence of the group warranted. Some children began to express annoyance with those who used anal talk frequently and irrelevantly, but with no noticeable effect.

Half the year passed and the teacher lost hope that the symptom would taper off automatically as it had in previous years. The teacher agreed, therefore, to experiment with group therapy. The details were repeatedly discussed by the teacher with the writer. A natural opportunity to intervene presented itself when the teacher overheard a group of boys talking about smelling 'heinies' and 'duty', and the following discussion ensued.

Teacher: Do you like smelling duty?

(Pupils look at one another but do not answer).

Teacher: Some children do, you know. In fact, lots of them do.

Pupil: Do they like to touch their duty?

Teacher: Some do and most likely each of you (naming the children) did.

Pupil: Did you when you were a child?

Teacher: That was very long ago and I can't remember exactly, but since most children like to do so, very likely I did too.

Pupil (very tensely): Do children ever eat their duty? What happens to them?

Teacher: I have heard of boys and girls who tasted their duty . . .

Pupil (interrupts tensely): What would happen to them?

Teacher: Nothing. It probably didn't taste very good.

(Pupils much relieved; one of them pleads:) Please say it again; say that message again.

Guided by the children's questions, almost the entire discussion was repeated, and still they wanted more. But the dismissal bell rang at this time.

The following school day, Monday, everything went on as usual, including free use of anal expressions. The worst offender was the most immature child in the group. As the day wore on, he got less and less response from the rest of the group. Towards the end of the day the child who had asked for a repetition of the 'message', said, 'Oh, that duty talk is baby talk. I'm not going to talk baby talk any more!' Suddenly, 'Oh, Mrs. X. (teacher) tell us that message again'. But again the dismissal bell rang and the teacher assured them that she would tell them about it next day if they wished. A chorus of voices eagerly assured her that they did.

It snowed the following day and outdoor play was very active which may have accounted for the absence of anal talk. When the circle was formed for discussion, the teacher said that some children had wanted her to talk about something. She was interrupted by one child who said, 'Yes, babies'. Another said, 'Duty'. A third said, 'Smell the duty'. All

were eager to discuss, but showed some self-consciousness and restlessness.

Teacher: Very small children like to touch and smell their duty.

Pupil: Oh no!

Another: You said one time about some child who ate duty.

A third: Did he swallow it?

Teacher: Yes, small children like to touch duty, smell it, and some like to taste it. I suppose many of you like to do all these things too.

All pupils: No-o-o.

Pupil: I did once—my mother's duty.

Teacher: Do you know why babies like to touch and feel their duty?

Pupils: No.

Teacher: What do babies do all day long?

Pupil: Stay in bed.

Another: They make duty in their beds, in their diapers.

A third: Some babies eat duty.

A fourth: My cousin eats duty.

Teacher: Does a baby make pictures?

Pupils: Chorus of 'no's'.

Teacher: Does a baby make things out of clay?

Pupils: Chorus of 'no's'.

Teacher: Does a baby make things at the workbench?

Pupils: Chorus of 'no's'.

Pupil: It's dirty talk.

Teacher: Is duty dirty?

Some pupils: Yes.

Teacher: What is duty made of?

Pupil: Food.

Another: Poison.

A third: Blood.

Teacher: Duty is made up of the food the body cannot use . . .

Pupil interrupts: Then why is it brown?

Teacher: When you mix all your paints altogether what color do you get?

Pupils: Brownish.

Another: Duty color.

Teacher: That's what makes duty brown. It is not blood and it is not poison.² Now let's go back to babies who can only make a few things. They can make . . .

Pupil: Duty.

Another: Wee-wee.

A third: Vomit.

Teacher: Yes, those are the only things a baby can make and it is happy and proud to make them. The baby is interested in these things it makes, and likes to touch them, smell them, taste them . . .

Pupil: But then we grow up so fast, we forget about it; we don't even know what we were when we were babies!³

Teacher: Kindergarten children learn to make many other things they are proud of . . .

(Pupils enumerate their achievements.)

Pupil (Impulsively): Let's make some more to our buildings.³

Another: Let's make some sawdust.

The children ran off to their respective jobs and worked more quietly, though enthusiastically, than the group had ever worked before. Not a moment was lost in the quarreling and bickering which usually goes on.

From this time, anal language diminished progressively and petered out through mutual discipline among the children and through dramatization. The spontaneous dramatizations took various interesting forms. The day following the discussion, the boys played at visiting one another's houses where they either 'did duty' or 'were duty' and were chased or swept out with broomsticks. Other boys shot at the 'duties'. In the next phase of the 'duty-it' game, two children were 'duties' and were chased by a man who wished to flush them down the toilet. In the next phase, the 'duties' were safe from flushing if they were on the slide which represented the Empire State Building. All children were required to take turns being

² This digression may have been unwise. It was made in the hope of alleviating an oft-recurring anxiety in connection with faeces as poison. The digression was not part of the planned discussion, but the temptation to kill two birds with one stone was too great to resist.

³ The child who made these remarks is the same one who asked for the 'message'. He is the 'pedagogue' of the group.

'duty', except one boy who gained exemption because he was the most popular boy in the class (incidentally, the least inhibited boy). Empire State was friendly only to the 'duties'. When anyone, child or adult, reminded them that they were still using 'duty' words, they would change the game to 'cops and robbers', and when they forgot, they would go back to 'duty and a man'. Such games were played with much excitement.

Still another version, 'ghosts', was played less excitedly. The ghost chases all the rest who are safe only when they are on a high place, such as the climber or the slide; when they are caught, they are imprisoned, until they escape and are again chased. After such games, a warm, brotherly feeling spread over the group and they would walk around arm in arm or embracing each other. Another dramatization was invented by one child (the one previously described as the most immature boy) who seemed to have a genuine need for this acting out. He named the game, 'flush-me-down-the-toilet'. It consisted of his crawling into an imaginary toilet, asking one of the children to pull the lever and thus 'flush the baby down the toilet by accident' (repeating 'by accident' several times); then the baby came out of the other end of the pipe 'by accident'. A little boy picked up an imaginary telephone and said, 'Baby, I'm calling you up in the sewer—hello!'; then the baby was reported to the uncle on the telephone as 'very bad'. At this point the baby ran away scattering make-believe money. He was delighted and excited with the game.

About three months after the group therapy discussion when anal talk had subsided almost completely, an 'accident' occurred: one of the boys swallowed a penny! He arrived at the infirmary weeping, complaining that he felt it 'right here'. The doctor assured him that he was all right, that the penny would come out in his next bowel movement, and that he could go back to his group. But the little fellow cried out that he wanted his penny *now*! He was given another penny and his tears instantly changed to smiles. When he returned to the group the children questioned him with wholesome curiosity but with no excitement. Some of the remarks were: 'It'll be

in your duty.' 'It'll be in the duty and you will have to look at the duty.' 'But I still have the penny now!' he said. The teacher explained that he had been given another penny.

This incident revived anal talk for a while, but it soon subsided to what is normal for a group of five-year-olds who are not required to conform to conventional modes of expression.

Educational group therapy accomplishes more than the removal of a symptom. It helps free children from guilt and anxiety by interpreting the symptom and universalizing it. They work it through or abreact it in their play. The relief and release children feel when the interpretation is made have the same explosive quality which characterizes the 'insight' of gestalt psychology in problem solving.⁴ The release of tension frees the children for sublimation: productivity invariably steps up and social relationships improve. To be sure, this does not happen to the same degree with all the children, some of whom are acutely in need of intensive individual therapy. Educational group therapy is of service however to these children, revealing more vividly by contrast their need for psychotherapy. They are children who play so passive a rôle in the kindergarten, or for that matter in any class, that they can very easily be overlooked unless the teacher is as oriented in the realm of personality as she is in subject matter.

Educational group therapy may be considered a periodic intensification of an intelligent educational program as it should be conducted from day to day. An intelligent educational program is one in which the subject matter and the approach to it are sufficiently challenging to the children to afford them ample opportunity for sublimation; one in which the teacher is as interested in the personality of the pupils as she is in the subject she is teaching; one in which group discussions are conducted informally and purposively. Such an educational program is as feasible in public schools as in private schools.

⁴ Cf. Köhler, W.: *Mentality of Apes*. New York: Harcourt, Brace & Co., 1925; and Alpert, Augusta: *Solving of Problem-Situations by Pre-school Children*. Teachers' College Publ., 1928.

BOOK REVIEWS

THE FIRST FIVE YEARS OF LIFE; A GUIDE TO THE STUDY OF THE PRE-SCHOOL CHILD. By Arnold Gesell, M.D.; and Henry M. Haverston, Ph.D., Helen Thompson, Ph.D., Frances L. Ilg, M.D., Burton M. Castner, Ph.D., Louise Bates Ames, Ph.D., and Catherine S. Amatruda, M.D. From the Yale Clinic of Child Development. New York and London: Harper and Brothers, 1940. 393 pp.

To all students of the development of mind and personality, a new book by Arnold Gesell is of special interest. His life work has become one of the important cornerstones of our knowledge of how the infant becomes a child. Gesell has been a pioneer in reducing problems of the infant's psychological development to scientific standards, and to a rare extent has combined the qualities of systematic observer and the ability to interpret his detailed memoranda in terms of a basic concept of development. The result is a basic science of the normal mode of maturation of those inborn physiological capacities essential to psychological and social performance.

There is a cleanness about both the technique and conceptual vision of Gesell which is seldom muddled by work from other fields. He can frequently refer to the importance of social and environmental factors which he has not intensively studied without being sidetracked by the work of those who have. This perfectionist individualism has contributed both to the clarity of his work, and also to his scientific isolation. The psychoanalyst will be the first to point out that Gesell has studied only the building material and not the carpentry of the individual's personality development. Gesell himself says in the book we are reviewing (p. 13): 'Environment determines the occasion, the intensity, and the correlation of many aspects of behavior; but it does not engender the basic progressions of behavior development. These are determined by inherent, maturational mechanisms.' Freud's own reiterated views of the importance of constitution refer more especially to the hereditary determination of drives and 'choice of neurosis' than to the effectors which Gesell especially studies; but there is no essential contradiction. The analyst can find in Gesell's results much empirical material for checking his own inductions

concerning infantile development, and especially the rudiments of the ego. The importance of such factors as fantasy, pleasure and pain, object relationships, and identification in determining the eventual selection and configuration of potentialities in the development of personality are vaguely recognized by Gesell, but not intensively studied. But morphology and physiology are none the less fundamental because they are not the whole story.

The First Five Years of Life is well described in the preface by a quotation from an earlier book by the senior author: A Psychological Outline of Normal Development from Birth to the Sixth Year, Including a System of Developmental Diagnosis. It will not become a basic book in child psychology only because it is essentially a restatement of those methods, results and fundamental concepts which were definitively presented in *The Mental Growth of the Preschool Child* (Macmillan, 1925) and *Infancy and Human Growth* (Macmillan, 1928). The new book does not present a basically new research, as did *Feeding Behavior of Infants*, by Gesell and Ilg (Yale University Press, 1937), nor is it a new technique of clinical reporting as was the detailed photographic manual, *An Atlas of Human Behavior* (Yale University Press, 1934). Some of the unity and literary effectiveness of the earlier books are sacrificed to the advantages of collaboration with his associates. It gains chiefly from the amplification and refinement of many details in consequence of the work of the intervening years and from the reiterated emphasis on the clinical viewpoint and depreciation of laboratory quantification for its own sake. The author warns us that 'the only way in which we can escape the errors of mechanical psychometric methods is to bring to bear the critical corrective of developmental interpretations'. Not test scores, but the expert appraisal of typical and atypical performance is to be esteemed.

The first five chapters are written by Gesell himself. They review without technical minutiae the principle that 'mental growth is a patterning process; a progressive *morphogenesis* of patterns of behavior' (p. 7). This has been studied with special reference to normative maturity levels in four basic categories: motor characteristics, adaptive behavior, language, personal-social behavior.

It would be hard to find a better epitome of preschool development from the standpoint of Gesell than the following thumbnail sketch (p. 13): 'In the *first quarter* of the first year the infant gains

control of twelve tiny muscles which move his eyes. In the *second quarter* (16-28 weeks) he comes into command of the muscles which support his head and move his arms. He reaches out for things. In the *third quarter* (28-40 weeks) he gains command of his trunk and hands. He sits. He grasps, transfers and manipulates objects. In the *fourth quarter* (40-52 weeks) he extends command to his legs and feet; to his forefinger and thumb. He pokes and plucks. He stands upright. In the *second year* he walks and runs; articulates words and phrases; acquires bowel and bladder control; attains a rudimentary sense of personal identity and of personal possession. In the *third year* he speaks in sentences, using words as tools of thought; he shows a positive propensity to understand his environment and to comply with cultural demands. He is no longer a 'mere' infant. In the *fourth year* he asks innumerable questions, perceives analogies, displays an active tendency to conceptualize and generalize. He is nearly self-dependent in routines of home life. At five he is well matured in motor control. He hops and skips. He talks without infantile articulation. He can narrate a long tale. He prefers associative play; he feels socialized pride in clothes and accomplishment. He is a self-assured, conforming citizen in his small world.'

This sketch is elaborated in the later chapters of Part I, which concludes with a chapter of photographic illustrations of preschool behavior.

The four chapters constituting Part II have been prepared by Dr. Gesell's associates: Halverson, Thompson, Castner, Ilg and Ames. They discuss in detail the eighty test situations used for examination at the Yale Institute, and should be of special value to the student and expert in this field. The technical details are treated still more fully in a fifty-eight page appendix on Examination Records and Arrangements. The final chapter of this section on Personal-social Behavior, by Drs. Ilg and Ames, is of more general interest; it contains a variety of data from the home situations of every child.

Part III by Dr. Gesell, with the collaboration of Dr. Amatruda in two of the chapters, deals with The Study of the Individual Child. He reiterates the need to avoid a 'myopic' view of psychometrics, emphasizes judgment in appraising test performances by reference to the total personality of the child, and discusses the art of competent clinical examination. 'The examiner', says Dr.

Gesell, 'who is truly imbued with a development point of view is keenly sensitive to the past history of the child, and looks upon the psychological examination, not as a series of proving tests, but as a device or a stage for evoking the ways in which this particular child characteristically meets life situations' (p. 266). The chapter on adaptation of the examination to atypical conditions, particularly psychological and physiological handicaps, and the chapter on personality characterization both illustrated by case material, are of special interest to the clinician. Dr. Gesell concludes with a chapter on the social significance of child psychology and its practical applications in the home, the school, and the clinic, in preparing our preschool children for life in a democracy.

There is a bibliography and an excellent index.

IVES HENDRICK (BOSTON)

GROWING OUT OF BABYHOOD. Problems of the Preschool Child. By William S. Sadler, M.D., and Lena K. Sadler, M.D. New York and London: Funk and Wagnalls Co., 1940. 350 pp.

AS THE TWIG IS BENT. By Leslie B. Hohman, M.D. New York: The Macmillan Co., 1940. 291 pp.

The dilemma of those who resist basic psychoanalytic principles and yet must incorporate into their thinking certain psychoanalytic concepts that have today become common property is illustrated in these two books. Inevitable misunderstanding of freudian ideas and conscious hostility and unconscious resistance to basic concepts make for a variety of inconsistencies in explaining behavior and suggesting treatment or training. Blind spots prevent clarifying situations on deeper levels in Hohman's book. Ambivalence mars the usefulness of progressive attitudes in the Sadlers' book.

The latter offers to parents a comprehensive guide to the psychologic aspects of early childhood problems, presenting modern attitudes on such matters as training for bowel and bladder control, thumb-sucking, fears of childhood, and all the usual problems of discipline and the relationships of parent and child. Where it is a useful book is in its concrete instructions and specific advice of a medical or pedagogic nature in certain typical difficult situations. Where it is weak from the psychoanalytic point of view, is in its detachment of one behavior phenomenon from another, a fault that follows inevitably from refusal to recognize the instincts

as the basic source of behavior, and to see the behavior as a connected outgrowth of these urges and the influence of the environment on them. For instance, negativism and stubbornness are discussed not as reaction-formations to anality, but in reverse, as the cause, or at most as parallel behavior with it. Again the pleasure accompaniment of sucking is recognized and a generally sane attitude towards its manifestations is recommended, but its 'sexual' significance is refuted, except in 'unusual' cases. This type of ambivalence due to misunderstanding of psychoanalytic concepts, due in turn to resistance, manifests itself through the whole book. Substitutive activities, preventive techniques, certainly useful educationally, are suggested for symptomatic behavior and neurotic characteristics, but as we know from clinical experience such methods are usually a matter of luck in their efficacy and never effective in severe disturbances. For example, while the authors seem to recognize the universality of masturbation and take a sensible attitude in advising less anxiety and threatening on the part of parents, their dilemma is evident from this statement: 'In dealing with masturbation, the matter of first importance is prevention'. Again, emotions, habits, personality and character development, both healthy and symptomatic, are discussed only on the conscious plane in the usual 'common sense' manner of guidance writers. The failure to differentiate between manifest behavior and the unconscious motivation causes a fundamental lack of unity in this book which accounts for discrepancies between understanding and advice. And yet it illustrates the unconscious acceptance of an assortment of current attitudes proceeding from psychoanalysis, so that supported by the experience and innate good feeling for children which the authors have, it is in spite of viewpoints and suggestions for training with which we would not agree, a handy guide for parents.

Outright hostility to psychoanalysis seems to be the propelling force in Hohman's book, for on it he blames all the errors of present-day upbringing. Psychoanalysis is, one gathers, responsible for what he calls 'the doctrine of "No Repression" '; for the widespread overindulgence of modern parents and for the serious errors of progressive education. Therefore he calls for 'common sense' and the old-fashioned ways of inhibition and control. It is quite possible that the parents of the children described are in need of the lively verbal spanking which the author administers, for they

seem to be overprivileged parents whose insecure personal relations cause overindulgence from guilt on the one hand, and anxiety and timidity in the ego training of their children on the other. If schools foster self-expression with no repression then they too deserve the scolding they cheerfully get here. The gross error seems to be in the assumption that psychoanalysis disregards ego development and is unaware of the inhibiting forces in healthy growth; that the neurotic behavior of the overprivileged is due to psychoanalysis and that all parents display this overindulgence; and that the errors of some progressive schools in their experimental days were characteristic of the majority of schools, where even now only in the mildest degrees freedom from regimentation has infiltrated. A statement like this: 'Even the most ardent psychoanalyst of today when faced by a boy who persisted in throwing stones at his playmates would see no virtue in stone-throwing as such' is unworthy of a serious writer. It succumbs to gullibility that is as far from 'common sense' as it is from science.

Yet in this book too the influence of psychoanalysis is felt. Especially as regards the adolescent good practical advice abounds. On sexual manifestations in adolescent behavior, sex enlightenment and the attitudes of parents and society to the normal sex urges and behavior which may conflict with moral attitudes, Dr. Hohman takes a consistently progressive and realistic point of view. These are the best chapters in the book.

What the early training for this should be is not made clear except by implication. It is not easy to follow the author's belief that to turn away from our knowledge of the function of the instincts in early development and the newer techniques of learning through pleasant ways, to the older ways—a slap, isolation in a closed room, spanking, (or a more modern form of punishment, immobilization)—will bend the twig in more desirable directions. While such techniques may be suitable for adult hysterics, we must register our disbelief in their efficacy as mental hygiene for children, and while no analyst would disagree with the author's concern for the need of ego reorganization among the youths in the milieu his cases suggest, one has the impression that the treatment is not really concerned with the basic emotional conflicts, but rather with the creation of defensive characteristics and reaction-formations.

One reads these books with the feeling that one cautious step forward has been taken in order to take two backward.

MARIE H. BRIEHL (NEW YORK)

STUDIES IN INFANT BEHAVIOUR. By Ruth Klein Lederer and Janet Redfield. Iowa City: University of Iowa, 1939. 157 pp.

Two students' dissertations, requirements for a doctorate degree, comprise the 1939 July issue of *Studies in Child Welfare*, a periodical which publishes the research work of the Iowa Child Welfare Research Station. The first study is devoted to an exploratory investigation of the 'handedness' question in the first two years of life and the second study is on the light sense in the newborn.

The first study, Miss Lederer's, very methodically and classically begins with historical references (Plato and Aristotle) and ends with an imposing list of forty-five references. A useful appendix appears at the end of the book. The first four chapters lead up to and include the setting up of tests and a description of the testing, whereas the fifth and sixth chapters are devoted to the analysis of the material from the point of view of the development of handedness and the causation of dominance (innate and/or environmental). The last chapter is a summary. The individual interested only in the findings and not in methodology can pick up the essence of the material in the last three chapters.

Miss Lederer's experiments were the first of its kind and were begun in 1934. In support of her findings are a number of factors inherent in the methodology, such as the length of time the experiments were carried out, the use of different types of handedness activities for tests as well as the carefulness of the tests. Care was taken to distinguish chance from significant results, all results were compared to previous experiments, and so on. Of the theoretical aspects, the following are some interesting findings. The initial period of ambidexterity, assumed as a fact by most authors, cannot be taken for granted. In one group, age three to eight months, over sixty-six per cent of the infants showed a preference for one hand. The same number showed left-handed as well as right-handed preference in the six to twelve month group, irrespective of sex. This latter fact was probably responsible for the fallacious general conclusion of initial ambidexterity. Change in handedness occurs more frequently in left preference and in the first year. Thus a test

in the first year has little predictive value. Consistency in response is much greater in the second year.

The comments on the causation of dominance are very limited and inconclusive. To test the effect of environmental influence, an experiment on nine children was carried out which led to the conclusion that strongly determined right handed infants were little affected by attempts to change the preference while less strongly determined cases may have been affected. This of course did not preclude innate structural factors as responsible for the right dominance.

The second study, by Miss Redfield, is an attempt to evaluate by several available techniques the sensitivity in the newborn to visual stimulation in regard to threshold, capacity for adaptation and ability to discriminate intensities. It is a painstaking study consisting of three main experiments carried out on ninety infants of one to nine days of age. It abounds in detailed tables and numerically expressed findings. At the end of each chapter are the conclusions clearly stated. Briefly stated, the essence of the findings is to the effect that the number of infants quieted by light stimulation, after a varying period of dark adaptation, is greater than the number excited. The extent of bodily activity is used as the index. The detailed findings cannot be summarized beyond the author's summary. The interest of the paper is primarily for the genetic psychologist and the physiologist.

LILLIAN MALCOVE (NEW YORK)

SCHIZOPHRENIA IN CHILDHOOD. By Charles Bradley, M.D. New York: The Macmillan Co., 1941. 152 pp.

This volume is essentially a review of the literature on childhood schizophrenia with the addition of some unenlightening comment by the author who is Medical Director of the Emma Pendleton Bradley Home, East Providence, Rhode Island.

Into sixteen chapters dealing with incidence, symptomatology, differential diagnosis, prognosis, etc., Dr. Bradley has sifted and arranged the pertinent findings and opinions of one hundred and twenty-seven investigators who have written on the subject.

The book is of value in its discussion of symptomatology, course and differential diagnosis, although this is presented entirely from a superficial phenomenological standpoint. The limitations of this

point of view are of course most apparent in the discussions of ætiology and psychopathology where the usual unscientific nonsense about heredity, constitution and endocrines is uncritically dealt with and enormously overweighted at the expense of the psychology of the developing child. The ideas of Melanie Klein, Susan Isaacs and other psychoanalytic workers are hurriedly passed over in a line or two while a good deal of space is given to a crop of meaningless comments like: 'Neither personal observation nor contributions to the literature offer a solution as to whether the schizophrenic child shuns reality because he prefers a life of fantasy, or whether he retreats into fantasy because he cannot bear to meet the problems of the world'.

There are author and subject indexes and a bibliography.

JULE EISENBUD (NEW YORK)

CHILDREN IN THE FAMILY. A Psychological Guide for Parents. By Florence Powdermaker, M.D., and Louise Ireland Grimes. New York and Toronto: Farrar and Rinehart, Inc., 1940. 403 pp.

Addressed to parents and others who have to do with the management of children from birth through adolescence, there is almost no subject from bowel training to religious teaching that may not be found in the very complete index of this book and amply discussed in the text. It is simple and nontechnical in its approach, drawing on medicine and psychoanalysis for its point of view.

This can be numbered among the very few popularly written books on how to bring up children that get away from the 'habit training' bugaboo and the notion all too common with physicians as well as parents that fixed schedules and rules rigidly adhered to are the secret of success with babies. Early in the book the authors declare: '... schedules are laid down for the baby's health and comfort and ... when these two requirements are endangered by too strict adherence to the letter of the law, "the law's an ass" and may be changed to fit the emergency.'

With this as a starting point it is not surprising to find the important problems of nursing, weaning, eating, bladder and bowel training, sleep, sucking, biting and all of the infant's early physical activities approached with consideration for the child's early instinctual needs and with attention continuously directed to individual

differences in these respects. The authors understand that a satisfied baby is better able to accommodate himself to later denials than one who has been forced to accept premature discipline and mechanical, impersonal training without warmth and enjoyment on the part of those who give it. The child's clairvoyance for his mother's real attitude and state of mind is likewise emphasized with warnings as to the effects of these when unfavorable, on the child's fundamental sense of security and well-being.

Parts I, II and much of III which deal with common nursery procedures with the infant and young child are excellent both in point of view and in offering details for practical measures designed to help children take the 'next step' in the difficult business of becoming civilized. Parts IV and V, however, which deal with the child during the early school years and adolescence, while often helpful, suffer somewhat by comparison. The book becomes less readable, more academic and conventional and as we go on the feeling grows that with the attempt to boil complex matters down to their essentials and present them simply, the authors sometimes oversimplify. This is very difficult to avoid and since parents must constantly act and therefore need to know all they can, the attempt itself is perhaps worth while. Nevertheless the reassuring tone and the promise of a happy ending for childhood problems is sometimes carried too far.

For example, as regards thumb-sucking: parents are told that the child needs to suck, that this is a primary need and that mechanical interferences do nothing but harm. So far so good. They are also told in the case of the young child that 'if he is given different toys to keep him busy, if he is not left unheeded too long in his carriage or pen, and if he is kept well fed and comforted when unhappy, the habit will diminish noticeably'. This is good advice at any time but it does not *always* cure thumb-sucking. There are other commonsense suggestions and the importance of making the child feel loved and cared for is again emphasized with continued assurances that 'the thumb-sucking eventually is bound to diminish and disappear'. Perhaps it is impractical to try to make parents aware of all the complications that may befall a child's oral development but this hardly seems an accurate picture of a great many cases, and parents are entitled to know that progress is not always so smooth. In addition, the question of possible dental malocclusion is too airily dismissed. ('Many dentists agree

that the habit does little or no harm to the jaw.') While this controversy still rages it seems rash to ignore the recent careful work in this field where the claims are quite to the contrary.¹

The authors' treatment of such manifestations as stealing, inability to concentrate, daydreaming and sex play and preoccupations are open to the same criticism. With most of these matters the approach is good enough as far as it goes. Sex curiosity and sex experimentation are 'natural' and the parent is led to believe that if met with a willingness to talk it all over and a reassuring attitude, the child's development will proceed unhampered. The discussion of masturbation is another case in point. Parents are assured that in itself it is harmless and warned against physical or moral restraints. Again so far so good. But the problem of what happens to a child or young person left to struggle with the problem of his own guilt is inadequately met. There is a tacit implication by the authors that guilt is always put into a child from the outside directly as the result of parental disapproval, whereas in reality the sense of guilt is the very price of civilization. While it certainly may be mitigated, it can never be wholly eliminated. Essentially, not masturbation itself nor even the fear of the physical consequences but the fantasies that accompany it are the greatest guilt producing elements. In the face of these the parents' reassurances can be only partially effective.

Problems arising in connection with discipline and authority—at once the most commonplace and the most difficult of all aspects of home management—are on the whole well met. Aggression in children is presented as a necessary part of normal growth, something to be understood and accepted in relation to a child's total personality, not as something to be either thoughtlessly suppressed or equally thoughtlessly ignored. The usefulness of dramatic play and stories in reducing aggressiveness is often charmingly illustrated. But one wishes too that the essential reasons for parental control stood out more sharply. Discipline is not merely a make-shift arrangement to keep children bearable until they grow up; nor is it just a system for instilling good morals and good habits, important as these things are. Essentially, discipline is a way in which parents by controlling, circumventing and sometimes punishing, save children *from themselves* and from the consequences of

¹ Swinehart, Earl W., D.D.S.: *American Journal of Orthodontics and Oral Surgery*. June, 1938.

their own primitive drives which if allowed to run riot, produce only bad conscience and a sense of guilt and failure. Too many parents (and others) missing this point fail their children and in trying to prevent well-known neurotic character formations precipitate them into worse ones.

The authors of course are not unaware of the pitfalls involved in every attempt to write simply on matters that have many complications. There are warnings from time to time that if the measures suggested fail, parents should turn to child guidance experts. There is a similar warning that a mother consult a psychiatrist when she is 'unable to achieve any kind of serenity either because she is unhappy with her husband or because she is confused and overwhelmed by family or personal problems'. But these occasional warnings are likely either to be passed unnoticed, or to come as a surprise to the parent who has read through so many reassuring pages. The book offers so much that is useful, that one wishes for more discussion and illustration specifically designed to awaken its readers to the vast importance of the unconscious factors in parent-child relationships and to the part they are constantly playing in family life.

ANNA W. M. WOLF (NEW YORK)

THE PSYCHOLOGY OF PARENT-CHILD RELATIONSHIPS. By Percival M. Symonds. New York: D. Appleton-Century Co., 1939. 228 pp. This book attempts to throw light on various aspects of the parent-child relationship and its influence on the teacher-pupil and counselor-client relationships. The author is well acquainted with the writings of Freud and his followers as witnessed in his introductory chapter, *Some Basic Concepts*. Also, in the last two chapters devoted to a discussion of the pupil-teacher and counselor-client relationship, the many quotations taken from the psychoanalytic literature show sympathy with, and at least an intellectual acceptance of that approach.

For this reason, the main body of the book is the more disappointing. Apparently it is an attempt to coördinate the academic psychological approach and the deeper insight gained by psychoanalysis. However, the latter is fairly well lost by the wayside in a maze of statistics and an effort to gather sufficient quantitative evidence to make the findings valid.

The greater part of the book describes an investigation by the

author of what he considers the main factors at work in the parent-child relationship. He says, 'After reviewing the mass of literature on this subject and attempting to reduce the confusion of thought to some sort of orderly and significant basis, it seemed apparent that *two* main factors are at work. One of these is the *acceptance-rejection* factor; and the other, the *dominance-submission* factor. . . . Both these factors may be thought of as existing in amount or degree. . . . The behavior of any parent may then be thought of as occupying a point on a two dimensional surface.' (*Acceptance-rejection* represented as the X axis, *dominance-submission* as the Y axis.) 'The point of origin (intersection) represents the ideal parent-child relationship. Such a parent neither over-accepts nor rejects his child—he gives affection moderately. . . . Such a parent is neither too strict and severe nor too lenient.'

The investigation proposes to answer the following questions: '(1) what sort of (parental) behavior characterizes the extreme of the two continuums, *acceptance-rejection* and *aggressiveness-submission*? (2) what child behavior is related to each combination of these two behavior tendencies in parents? (3) what is there in the background of either parent or in the relationships between the parents that can be related to the adoption of a given form of parental behavior towards the children?'

The author realizes that ambivalence complicates the picture, noting that there are three extreme and undesirable forms in each of the two continuums, namely acceptance, rejection, and ambivalence; and dominance, submission and inconsistency. One wonders why in the compilation of data the factor of ambivalence was not given specific mention. Perhaps this was not sufficiently recognized by the former students of Symonds, who, under his instruction, collected the material upon which the investigation is based. But from the psychoanalyst's point of view, this is only one of many important omissions which are no doubt largely due to the method employed, one of the weakest points in this study. Although the author clearly understands the importance of unconscious factors and their effect on the parent-child relationship, his instructions to his assistants throw emphasis on the superficial, easily recognized factors in overt behavior.

Another bad feature of the method, is the large number of assistants each of whom was asked to find one family in which a child was either accepted (or dominated) and one family in which

the child was rejected (or was dominating). The age of the children was unspecified, but each pair was to be as nearly as possible like each other in sex, school grade, social background and intelligence level. Thus the study attempted to compare accepted and rejected children and dominated and dominating children roughly matched in 'fundamental' characteristics. Although Symonds took every precaution to be specific in his instructions, it is obvious that the thirty-one persons who contributed the studies on acceptance-rejection, and the twenty-eight, the studies on dominance-submission, must represent equally many points of view.

Summarizing the conclusions arrived at in the acceptance-rejection study, Symonds states, 'that accepted children show predominantly social characteristics' and 'rejected children show attention-getting, restless, anti-social trends; also that it is fair to suspect that children showing either of these two extreme types of behavior have been accepted or rejected by either or both parents'. 'Accepted children are emotionally stable, well socialized, calm and deliberate, enthusiastic and interested and have personalities possessing admirable qualities. Rejected children, on the other hand, show much emotional instability, an excess of activity and restlessness, are generally antagonistic toward society and its institutions, and show apathy and indifference.'

Children of dominating parents are better socialized, have more acceptable behavior, and conform more closely to the mores of the group than children of submissive parents. They are more interested in and have a better attitude towards work and school. However, they tend to be more sensitive, self-conscious, submissive, shy, retiring, seclusive and have greater difficulty in self-expression than children who are given more freedom. Although children of submissive parents have many bad traits, are disobedient, irresponsible, and disorderly, they have the advantage of being forward and can express themselves effectively. However, they also tend to defy authority, to be stubborn and unmanageable. Accepted children are more like dominated children, where the rejected children are like the dominating children. Symonds found no evidence that submissiveness on the part of parents leads to delinquency. Dominant parents tend to have submissive children and vice versa.

The author himself makes several pertinent criticisms of this study. On page 138 he says, 'This study is tantalizing because of what it does not show—it is quite obvious that the analysis must be carried further and the sexes treated separately. Does it make a

difference to a boy whether it is his father or mother who dominates him? Does it make a difference to the girl? What is the influence on the personality of a boy or girl if the mother is strict, the father passive, or vice versa? The œdipus situation in childhood is undeniably making its mark on the growing personality of the child according to the differences in the personalities of his parents.'

It is disappointing that the author does not put his knowledge of psychoanalysis to greater practical use. The concepts of identification and projection are hardly more than hinted at and transference is only spoken of in the relation of the child to the teacher. The fact that parents and teachers project feelings onto the children is entirely omitted. In discussing the teacher-pupil relationship, Symonds emphasizes the individual relationship and the parallel to that of the parent-child. It would have been important also to point out the difference; the rôle of the teacher as the leader of the group.

MARJORIE R. LEONARD (LOS ANGELES)

PRACTICAL CHILD PSYCHOTHERAPY. By Curt Boenheim. London: John Bale Medical Publications, Ltd., 1938. 177 pp.

Stemming as it does from the pediatric clinic, this book by Dr. Boenheim is concerned with the emotional difficulties of the child which are most frequently seen by the physician and as such fulfils a need which some pediatricians have been verbalizing for several years. Because of his pediatric approach, Dr. Boenheim's book should meet with greater acceptance than most of the child guidance literature to date. Although he discusses the theories of personality development of Adler, Jung, Buehler, etc., he favors the freudian theory and thus bases his discussion of the emotional difficulties in children on a firm footing. He even goes so far as to state that a 'thorough training in analysis is just as necessary for the work of a child psychotherapist as it is for the psychotherapist dealing with adults'. In his discussions of specific types of cases, he shows a good understanding of psychoanalytic theory. However, he discounts child analysis as a therapy for younger children 'since in most cases the child has no appreciation of its own condition nor of the distinctive features of treatment'. His own method of treatment is directed in general toward the manipulation of the environment, so that the child is exposed to a more normal home and social life.

This method suggests the belief that by changing those factors

in the present situation which were responsible in the past for the development of the neurosis, one can expect a reorganization of the child's personality sufficiently great to react adequately to a more auspicious environment. For some problem cases such an assumption is known to be legitimate. Not only is this demonstrated by the favorable outcome of the cases treated by Dr. Boenheim, but also by many cases treated favorably by this method in the majority of child guidance clinics in this country. The psychoanalytic theory of the development of the ego also warrants such a conclusion in cases where the ego is quite undeveloped and where the child is still very dependent upon the adults in his environment, that is, in the preschool and early latency periods. However, there are many cases in which such superficial treatment has little or no effect upon the child's personality or symptoms, and effective results can be obtained only by direct treatment of the patient. Fortunately, Dr. Boenheim recognizes this, at least theoretically, for as an addendum to the treatment discussion of each type of difficulty he suggests the use of individual psychotherapy if other methods fail. Although environmental manipulation is the major suggestion offered in the discussions of therapy in specific symptom groups, in the general discussion of methods he recommends as adjuncts in treatment the use of hypnosis, rest and relaxation, exercises, reassurance and particularly training of the patient when such procedures seem indicated.

The neurotic difficulties which are considered in this book are those more directly connected with somatic illnesses, and many problems met by the psychiatrist are not even mentioned. Dr. Boenheim discusses anorexia, vomiting, rumination, constipation and faecal incontinence, enuresis, masturbation, tics, fits, stammering, and finally some general somatic disorders of the heart, the blood vessels, the lungs, the brain, etc. However, he omits any mention of difficulties in behavior which have no somatic concomitants, such as antisocial stealing, destructiveness, shyness, or specific neurotic syndromes such as phobias, compulsions or the learning difficulties in school adjustment.

This book obviously does not present any new information concerning causative factors of child neuroses or their treatment, since there is nothing which has not been written many times in various manners, nor yet does it present the material more adequately than others have done, although it is smoothly written and quite well

organized. In the reviewer's opinion its greatest value lies in the fact that in readable, simple language a physician presents to physicians well established psychiatric concepts. From this viewpoint it is more likely to receive the friendly notice of pediatricians. Since it does not insult them by discussing socially taboo subjects or by using technical psychiatric language, it may aid in allaying the antagonistic attitude which many pediatricians possess towards the general field of child psychiatry. At the same time the treatment methods suggested by Dr. Boenheim are sufficiently harmless and yet sound enough to warrant their use by the pediatrician in certain mild cases in which his good relationship to the mother and child indicates that he is the best person to treat the case. Experience has shown that superficial treatment in the early phase of symptom development may frequently prevent the development of a more serious neurosis and, since the pediatrician is most often the person who sees the child at the onset of the illness, he is in a uniquely favorable position to practice preventative psychiatry.

MARGARET W. GERARD (CHICAGO)

LA PUBERTÉ: ÉTUDE CLINIQUE ET PHYSIOPATHOLOGIQUE. (Puberty: A Clinical and Psychopathological Study.) Edited by Guy Laroche. Paris: Masson et Cie., 1938. 346 pp.

Moved by the beautiful poem *Rolla* in which Musset glorifies youth, Guy Laroche, the distinguished endocrinologist of the Tenon Hospital in Paris, regrets in his preface to *La Puberté*, that this 'ideal evolution' cannot be valid for the youth of our time. The adolescent of our day is often unbalanced thanks to a milieu which having confused him and crippled his mind proceeds to misunderstand him. Referring to numerous authors, particularly Gide, who have portrayed the consequences of an abnormal sexuality, Laroche deplores the mistakes which contemporary educators daily commit.

Unfortunately, this volume fails to bring to the problems of the adolescent the understanding so earnestly desired by the editor. In some twenty articles contributed by as many well-known French physicians, very little space is given to the psychological aspects of adolescence while a great deal is written about the medical problems of individuals in this age group. The question of sexual orientation and its relationship to the developing personality is

taken up almost exclusively from the hormonal standpoint. In this nothing original is offered.

No endocrinologist's library should be without this book.

PAUL FRIEDMAN (NEW YORK)

EMOTIONS AND CONDUCT IN ADOLESCENCE. By Caroline B. Zachry, in collaboration with Margaret Lighty. New York and London: D. Appleton-Century Co., 1940. 563 pp.

This book is a final presentation of a five year study set up within the Commission on Secondary School Curriculum of the Progressive Education Association. Its purpose was first to clarify the dynamic picture of the adolescent working out his life adjustments and second to define the responsibility of the secondary school educators in helping the adolescent work out these adjustments. Dr. Zachry, the organizer of the study, included in her staff workers representative of the various fields of education, psychology, medicine, anthropology, sociology and social work. The investigations were carried on in both private and public secondary schools and the data gathered from many sources such as direct observation, anamnesis, discussion groups, products of class work, interviews with guidance counsellors, and so on.

The result is a carefully arranged, clearly written, well-indexed textbook, invaluable for teachers, guidance workers and other specialists in the field of education. As a contribution to progressive education, the study is doubtless of very great importance. The psychoanalyst may find that the book falls somewhat short as a comprehensive study on adolescence because of the simplification of causality and the special emphasis on the approach necessitated by the goal of educating the educator. Nevertheless, it is well worth reading.

The preface outlines the school's responsibility toward the adolescent in his adjustments to life, the school's resources for understanding these needs of the adolescent and the actual rôle that different members of the staff can play in this process. The scheme of the book is based on the view that adolescence is a transition period in which profound emotional adjustments are being made, towards self, towards people and towards the community. These three aspects are then discussed in three major parts, captioned: Changing Attitudes to the Self, Changing Personal Relationships, and Changing Attitudes to Basic Social Insti-

tutions. The rôle of education is discussed in each section in detail and with frankness. Case illustrations from a few lines to a few pages give vivid examples of the many different kinds of behavior so that it is very clear even to readers unacquainted with the concepts presented. Where the behavior is disturbing, the author advisedly uses the term 'troubled adolescent' rather than 'neurotic', and the behavior is presented as symptomatic of certain needs, deprivations, conflicts, anxiety, etc.

The first part, *Changing Attitudes to the Self*, is an excellent dissertation on the interweaving of the physical and emotional development in both boys and girls, and it is supplemented by a fine chapter on physical growth changes and the process of maturation contributed by Dr. B. Spock. No one school of psychological thought stands out as the basis for the analysis of the behavior and feelings of the adolescent. The main premise can be summed up in the sentence that the child who grows up in reasonable security does not find the problems inherent in adolescent growth too much to assimilate. As prerequisites for security are included relatively mature parents who accept themselves, relatively good relationship between the parents and capacity in the parents to accept the children as individuals which is basic for the child's feeling of adequacy. As a corollary, the difficulties of adolescence arise from emotional insecurity (from too much protection or not enough affection) which produces a feeling of unsureness, a low self-esteem which then results in conduct variations from too great dependence to defiant antisocial acts. The happy medium is obviously a reconciliation between the reliance on parental standards and a self-determination. The reader truly has the opportunity to see beyond overt behavior and into some of the intrapsychic constellations in the child. The author includes a concise discussion of the standards of worth in American culture, the origins of these standards and their influence on the adolescent as he seeks to find for himself a place in adult economy. Thus the discussion of the influences affecting the feelings and conduct of the adolescent emphasizes equally the environmental forces, social (includes family) and economic, as well as the inner drives, sexual and hostile impulses in particular.

Part two describes the changing and fluctuating picture of the adolescent's everyday behavior as expressed towards his family, home, peers, school, other adults as educators, group leaders, and

to groups. Particularly stressed is the changing attitude towards parental authority and protection and the effect of this on behavior towards parents and other adults. The adolescent's frequent precipitous plunging into relationships is described by the author and ascribed to insecurity. This is probably true, yet it is such a usual experience in adolescence that one might wish it had been more clearly described as normal for reasons inherent in that stage of emotional development. The same is true of crushes and hero worship. Since the author does not actually say these are abnormal manifestations, it is only for the less well prepared readers that one would want to make more clear the relative normality of such conduct.

The third and last part of the book deals with the changing attitudes in adolescence towards vocation, marriage and citizenship. Again the discussion includes the values in these adjustments in terms of inner emotional needs as well as social values. The last part really takes the adolescent into adulthood. The book ends with a section describing the choice of a staff of educators and a description of successful maturity.

LILLIAN MALCOVE (NEW YORK)

PSYCHIATRIC CLINICS FOR CHILDREN. With Special Reference to State Programs. By Helen Leland Witmer. New York: The Commonwealth Fund, 1940. 437 pp.

This book deals particularly with the psychiatric service available for children in nonmetropolitan areas, most of which is conducted under state financed programs. Dr. Witmer has undertaken to review and analyze the data collected by field workers of the National Committee for Mental Hygiene. But, in view of the advances in psychiatric and case work with children, and in view of the growing interest in this field, she presents much more than the Survey which makes up the second part of her book. The first part gives an orientation in the theory and history of clinical child psychiatry, with attention to 'the cultural pre-requisites of a successful mental hygiene program'. The concluding portion of the book consists of a discussion of Principles for Future Programs. This arrangement of the material adds much to the appeal of the book in that it permits readers of varying interest to select material without losing the continuity.

Adolf Meyer is given major credit for stimulating child psychiatry in this country, at least the state supported programs. This was a direct derivative of his early insistence on the need for psychiatrists to obtain more information about the lives of their patients; his demand for preventive measures; his encouragement of social service, and his efforts to make the mental hospital the center for community mental health work. Meyer's chief contribution to theory lay in his point of view regarding 'the wholeness of human behavior and the uniqueness of each individual case'. The freudians revealed the importance of parent-child relationships, the capacity for self-direction in the individual, the purposiveness of behavior, the importance of transference phenomena, and 'cast doubt on the appeal to reason as a major therapeutic instrument'. This 'faith in the guiding power of reason and the conviction that social conformity is a matter of conscious control' is a prevalent American attitude that offers much resistance to effective child psychiatry and nowhere more fiercely than in rural areas. Along with this goes the awe of the mentally ill, the fear of the psychiatrist, and the attitude that to seek psychiatric help is an admission of personal failure. Following these comments on cultural attitudes, the author offers further historical material on the evolution of psychiatric clinics for children. These chapters close with statistical data concerning the inadequacy of present clinic service for the rural areas and small communities.

Part II consists of a survey of state financed clinics. The survey is an exhaustive one and covers such matters as the origins of the clinics, factors important in initiating the need and demand for clinic services, the number and types of patients served, service offered, the staff, influence of the training of the staff on work with children, quarters, schedules, etc. In general, the state hospital clinic programs meet with difficulties due to the staff attitude (consequent on work in hospitals and with psychotic patients), the staff's lack of training for work with children, the limitations inherent in rural work, the public's attitude towards mental hospitals and mental disorders. Only a third of the clinics had the usual child guidance clinic staff of psychiatrist, psychologist and social worker. In only one clinic of the large group studied (apparently two hundred eighty-one) was the psychiatrist specifically trained for work with children. In most clinics, the great majority of the work consisted of diagnosing and making recom-

mendations for feeble-minded or neurologically disabled children. This service met with much appreciation. But if the children referred suffered from more exclusively emotional disorders, criticism was apt to develop over the meager treatment facilities. 'Our survey of the clinics seems to throw doubt on the hospital's ability adequately to serve such patients and, indeed there was some question whether completely satisfactory service to any group of children can be rendered by a staff whose outlook is that of the typical state hospital.' Case studies were presented not only of clinics conducted by state hospitals but of those under auspices of medical schools, psychopathic hospitals, and by central departments of state governments. These studies serve to point up both the difficulties and the encouraging aspects of clinic work in this still highly experimental field.

The third section of the book deals with Principles for Future Programs. In the author's opinion, the basic need is clearer definition of the clinic's function by the administrative authorities. Aims set in the past have been in general, of three types: (1) reduction of admissions to institutions; (2) prevention of the development of psychosis and crime; (3) psychiatric assistance to children who need and desire it without regard to potential later developments. The first goal is possibly being met in a limited degree by the present clinic work with the feeble-minded and neurological patients, though it would appear that the recommendations are all too frequently for custodial care. A more intensive effort at reduction of admissions would entail a much greater educational and therapeutic effort with much greater demands on community resources and tolerance. The desires of the family would have to be considered much more; the desires of various local authorities overruled or modified. Various modifications in the present state hospital clinics are suggested that might better equip them for this work. This is the field in which they could probably operate at best advantage, and the tentative suggestion is advanced that perhaps they might confine their work to this type of service.

The second aim-prevention of psychosis and crime is held to be untenable as a primary objective. It is questionable whether such children can be identified unless they have already progressed to the early stages of such a reaction. The development of this argument cannot be considered here in detail but it should prove provocative.

The modern child guidance approach is offered as the best method for the achievement of the third aim in these nonurban areas. An extremely clear and informative discussion of child guidance is presented. Child psychiatry developing out of non-freudian adult psychiatry is contrasted with the psychoanalytic method. Both systems are in sharp contrast to child guidance in the rôle assigned to parents in treatment situations and in the degree and fashion in which case work is used. Sources of conflict are discussed which may arise out of such differences if the training of the staff members has been heavily and variously influenced by these different systems of therapy. This should prove to be one of the most helpful chapters in the book to clinic staffs working with children, or with adults.

The final chapter deals with the planning of an effective psychiatric service for small communities. Many questions may be cleared if the function of the clinic is clearly defined. This holds for structure, personnel, policy, services, relationships to the public. The obvious need is expressed for an adequately trained staff to work with children, parents, and with the local aides. Suggestions are offered regarding a better adaption of traveling clinics to the rural field. There is need for more careful selection of the auspices under which clinics are opened in order to insure their acceptance and use. Clinics should not be opened prematurely in areas, for instance, where necessary improvements in the environmental situation of the patient cannot be met or when the professional public lacks adequate understanding of how to use the kind of help the clinic can offer.

This excellent book contains a wealth of sound helpful information presented in an objective and scholarly fashion. It is recommended particularly to psychiatrists engaged in clinic work, to social workers, and to the lay public interested in advancing the welfare of children.

WILLIAM H. DUNN (NEW YORK)

LOGICAL ASPECTS OF EDUCATIONAL MEASUREMENT. By B. Othanel Smith. New York: Columbia University Press, 1938. 165 pp.

An interesting statement of the special problems of this specialized educational field, an adequate and thoughtful account is given of the foundation and the development of the science of measurement. The focus of attention is on mathematical

logic as it relates to appropriate materials and methods of study. The author works hard to add a sense of 'self' to behavioristic psychology, and the drama of the book consists of the reader's discovery that tests involve people, people who might have feelings. In considering the trends in quantitative versus qualitative testing, the author cautiously takes sides, in the vexing question as to whether behavior is to be viewed as a unitary process or as an aggregate of elements. He thus concerns himself with a problem which is gaining increasing recognition by educational psychologists—the effect on test results of 'phenomena usually classified as mental'. His frank inquiry leads him to suggest that because tests do not as yet reflect the manifestations of these phenomena, the 'validity of our instruments is seriously in question'.

The style, unfortunately, has the flavor of a Ph.D thesis. The text is cluttered with exaggerated acknowledgments to various authorities and is unnecessarily repetitious. And in spite of the author's humanizing conclusions, the book remains a far better reference on the discipline of mathematics than on the human beings whose behavior is in question.

ELIZABETH H. ROSS (PHILADELPHIA)

PSYCHOLOGY APPLIED TO TEACHING AND LEARNING. By Coleman H. Griffith. New York: Farrar & Rinehart, Inc., 1939. 650 pp. The review of this book can be brief. In its 650 pages it contains the contributions of descriptive and experimental psychology to the processes of learning and teaching. Seen from this point of view it is an industrious, well ordered book, but it contributes nothing new.

From the beginning to the end it is imbued with J. B. Watson's behaviorism. Throughout the emphasis is placed on training; proper training in sex matters prevents the conflicts of adolescents. Thorough knowledge of the mental and emotional growth of the individual is strongly advocated; however, the discussion dealing with these problems creates the impression that growth is something exactly measurable and that we are easily able to determine a psychic diet fulfilling the requirements for a proper intellectual and emotional development. In the chapter on personality and problems of adjustment a short paragraph is devoted to 'detours in adjustment'. Compensation, repression and negativism are briefly

discussed, while projection and rationalization are dealt with under the heading: Miscellaneous Detours. No further use is made of psychoanalytical concepts.

In this QUARTERLY (Vol. VIII, No. 1) Caroline B. Zachry writes: 'On the basis of their observations of classroom behavior, educators are dissatisfied with the explanation offered by educational psychology and they are turning to psychoanalysis'.

Some are, and some aren't.

FRITZ MOELLENHOFF (PEORIA, ILL.)

THE PSYCHOLOGICAL ASPECTS OF PEDIATRIC PRACTICE. By Benjamin Spock, M.D., and Mabel Hushka, M.D. New York State Committee on Mental Hygiene, 1939. 51 pp.

In a chapter of some fifty pages, reprinted from the Practitioners' Library of Medicine and Surgery, Volume XIII, pp. 758-808, the writers have set out to call to the attention of pediatricians some of their responsibilities regarding the mental hygiene problems of early life. Neurosis they are told is largely the full blown outcome of seemingly slight deviations from normal functioning which may occur in the beginning of life.

In this brief work the authors touch on such problems as early feeding methods, weaning, thumb sucking, nail biting, toilet training, psychogenic vomiting, speech disorders, constipation, enuresis, anxiety, temper tantrums, discipline and spoiling, sibling jealousy, masturbation, sex education, the œdipus complex, castration fear, phobias, tics, hysteria, compulsions, asocial behavior, school problems and the handling of medical and surgical problems. With such an array of subjects they can do little more than point out that these problems exist and perhaps stimulate interest in becoming better acquainted with them.

Particular emphasis is given to the fact that the majority of behavior difficulties arise in the child as reactions to emotionally disturbed parents. The general attitude to be encouraged is one of leniency in matters of training. Basic factors of early instinctual organization and control are not made clear, however.

Perhaps the most important points brought out are that seeming naughtiness is usually a manifestation of anxiety, and that masturbation, when it becomes excessive, is frequently due to lack of love or some serious privation.

MARGARET A. RIBBLE (NEW YORK)

ABSTRACTS

Some Peculiar Manifestations of Memory with Special Reference to Lightning Calculators. A. A. Brill. *J. of Nerv. and Ment. Dis.*, XC, 1940, pp. 709-725.

The case is presented of a six-year-old boy who suddenly acquired the faculty of adding instantaneously long columns of numbers of four to six digits. The correctness of his answers was all the more astonishing because the subject knew only the written number three at the time and had never had any schooling. No other talent was noted in the child; his other intellectual performances were average or even lower than average. The boy's talent in adding disappeared completely at the age of nine or ten, and when the author reexamined the subject at the age of twenty-eight, he concluded that the subject was 'a well adjusted person of the mixed schizoid-syntonic type and personality' without any outstanding characteristics. After discussing the literature on mathematical prodigies, the author presents his own explanation of the phenomenon which, he believes, is a manifestation of phylogenic memory. Hering, Bleuler, Simon and Freud's last contribution on racial memory are quoted. Ontogenetic factors such as fixation to the anal-sadistic organization of libido, loss of beloved relatives and others are evaluated in the case he reports and in some historical cases such as that of Blaise Pascal.

The author evaluates this talent of the child not as an asset but as a serious obstacle in the child's development. He concludes that 'like the neurotic who is seriously handicapped in his adjustment to life because he has to cope with a fragment of his infantile sexuality in adult life, the infant prodigy is even more afflicted because for some as yet unknown reasons he has to cope with a fragment' of his phylogeny.

K. R. FISSLER

Homesickness and the Mother's Breast. Editha Sterba. *The Psychiatric Quarterly*, XIV, No. 4, 1940.

The author shows, in an interesting analysis, the meaning of homesickness to a girl of five years. After being settled in a new home and country for several months the child suddenly began to long for the estate of her grandmother where at the age of four she had found consolation for the frustration attendant upon the birth of a little sister. The grandmother and a friendly dairymaid had helped her to get over the disappointment of having to share mother's love with the new baby. Her jealousy was particularly aroused by the mother's nursing the baby. A cow which 'had four nipples and belonged all to herself' was accepted as a satisfactory substitute. What appeared to be homesickness proved to be a longing for the mother's breast. In fantasies which the child dictates to her mother, 'fear of starvation, the anxiety that her mother will no longer be in a position to maintain and feed her child' appear as her most important problem. In these fantasies, jealousy and death wishes against her

siblings are also expressed: The mother-bird 'had eleven little ones that had all been eaten up by a cat, except the eleventh . . . and so she thought, "It is a good thing the children are dead . . . now perhaps I shall be able to feed the one that is left." . . . The next day the child said to its mother . . . "I haven't enough to eat. . . . I must go away."' This fantasy reveals the familiar relation between aggression and fear. The little girl who obviously has a strong oral fixation to the mother's breast wants to get rid of her siblings because she does not want to share her food with them; she wants to let them starve. She is afraid that she will starve. Fear that the mother may no longer be in a position to feed her is rather a fear that mother, whose babies she wants to destroy, will not want to feed her as a punishment for her wickedness. The author says these fantasies occurred at the peak of the child's nostalgia.

We know that children at times react with anxiety to any change of living quarters even when their parents feel perfectly secure and at ease about it. They are even more likely to be disturbed when the parents feel uncertain and fearful themselves.

Further experience will show whether general conclusions can be drawn from this case.

EDITH BUXBAUM

Studies in the Interpretation of Play: I. Clinical Observation of Play Disruption in Young Children. Erik Homburger Erikson. Institute of Human Relations and School of Medicine, Yale University, New Haven. *Genetic Psychology Monographs*, XXII, 1940, pp. 557-671.

This monograph reviews specimens of a psychotherapist's experience. Observations of the first play enacted by young patients in the therapist's office are described in detail. What are the outstanding attributes of observation of play and what conscious considerations lead to the 'meaning' on which diagnostic decisions are based? In the introduction it is emphasized that little attention to the analysis of play was given by Freud who gave so much consideration to dreams, slips of the tongue and wit. The English school of thought is criticized and with reference to Melanie Klein: 'The author of this paper cannot at the present time overcome a suspicion as to the final adaptation of the child cured by this method to any environment except that which cultivates a special type of psychoanalytic outlook.' Melanie Klein's interpretations are called 'fairy tales stripped of all artistry'.

The clinical descriptions are model examples of clinical observation, and concern 'a six-year-old boy's secret; a neurotic episode in a girl of three; orality in a boy of four; and destruction and restitution in an "epileptic" boy of four'. The psychoanalytic attributes of this material are on the whole the mechanisms of resistance, transference and regression. They appear in the interplay of social, verbal, spatial, and bodily forms of expression. It is in the metaphoric and symbolical use of toys that all these defenses are first caught off guard by the observer. In the microsphere of play the child does what it does not dare to do in reality.

MARTIN GROTJAHN

The Chronically Aggressive Child. Gerald H. Pearson. *Psa. Rev.*, XXVI, No. 4, 1939.

In this paper the author attempts to discover the reasons for chronic aggression in children. The most interesting section is a report of the clinical observations in his research to discover how early the defense mechanisms against aggression are active. To this purpose a 'group of sixty-four children, thirty-six boys and twenty-eight girls whose ages ranged between two and four years, were observed at Temple University Nursery School for a period of nine to eighteen months'.

Pearson comes to the conclusion that there are twenty different types of psychic defense against aggressive impulses: *withdrawal* from a social situation; *inability to hear*; *denial*, verbal or by gesture; *secretiveness*; *distortion*, by doing something which had been approved in one situation, in another where the act was one of veiled defiance; *confusion of thought*; *confusion of speech*; *promises* not to repeat the act in order to avoid punishment; *rationalization* by giving absurd reasons why they do or do not do certain things; *inhibition* (a) out of fear of retaliation, (b) inhibition of a substitute activity to which the aggressive impulse had been displaced. *Reaction-formation*; *displacement*; *regression*; *the use of bodily organs* to prevent expression of aggressive impulses; *guilt* often evident in the facial expression; *restitution through punishment* by which some children permit themselves to express an aggressive impulse by making restitution through suffering direct punishment, disapproval from adults, or the direct punishment of self-denial; *change of direction*; *identification* (a) with a permitting adult, (b) with a prohibiting adult, (c) with a permitting adult against the prohibiting one, (d) projection of the instinctual desires onto an object who is then punished (in fantasy), (e) identification with the effect of the aggressive impulse on the object. *Projection of the aggressive impulse* (a) on to inanimate objects, (b) to a part of the body, (c) to another child. This takes place in several steps: (1) the aggressive impulse has to be regarded as not part of the self, (2) the next step is to urge another child to do the aggressive act; (3) the child denies that he has any aggressive impulses—some other specific child has it or has the impulse to do it; (4) the aggressive impulse may be projected to an adult. The impulse may also be projected (5) to an adult; then the adult's criticism may be introjected and reprojected to the adult; (6) an active impulse may be projected in a passive form to the object of his aggression: 'One boy said he bit another child because the latter wished to be bitten'. (7) The most effective form of projection is the phobia. A boy who had a great deal of trouble with his impulse to bite developed a phobia of dogs, biting animals. *Aggression itself* may serve as a defense against aggressive impulses.

One cannot help but wonder by what methods Pearson reached an understanding of the unconscious intention behind the acts he describes since presumably there was no opportunity to analyze the children.

Aside from confirming that defenses occur, and classifying the various types of aggression displayed by children between the ages of two and four in a rather unsystematic classification, Pearson has not solved the question he set out to answer: how early defense mechanisms against aggression are active. It would seem probable that the various mechanisms appear at different stages in the child's development; also, the types of defenses used must in some way be

related to the nature and motive for a particular aggressive act. One might expect that a type of defense (or lack of it) would become chronic, depending on the frequency of the need for the aggressive act, and on the response of the environment to it. Pearson stresses the importance of these factors individually, but not their interdependence, in causing a child to become chronically aggressive. He finds that certain individuals prefer certain methods of defense, and that these defenses may be classified into those that are personally useful and those that are a hindrance to an adequate social or sexual life. It is a child whose defenses remain inadequate to handle a situation who becomes chronically aggressive.

Pearson comes to the conclusion that the causes of chronic aggressive reaction are (1) Congenital endowment with more than the average degree of aggressive drive. (He tries to correlate his observations with Freud's theory of a primary death instinct and seems not to distinguish between activity and aggression.) (2) Brain lesions which disturb the cortical control over the expression of aggressive impulses. (3) Preëxistent guilt feelings. 'Mild forms of chronic aggression, naughtiness and mischievousness, may result from the attempt of a child with a feeling of guilt to obtain punishment.' (4) Total or partial rejection of the child by his parents. (5) 'Active aggression as a defense against passive aggressive desires' which probably means against 'masochistic desires'.

The fate which awaits the chronically aggressive child is not an attractive one. 'The individual tries to curb his hostility because of the painfulness of the hostile environments.' The child reacts either by erecting obsessional defense mechanisms or a paranoid reaction may replace the chronic aggressive one; or the chronic aggression may be partially eroticized resulting in the perversion of sadism. A fourth possibility is that the chronic aggressive reaction continues unchecked internally and the individual places the whole responsibility of the problem on the social organization.

A discussion of the treatment of the chronically aggressive child concludes the paper. The author finds many difficulties and dangers in successful treatment, the main aim of which is the removal of fear and anxiety which interferes with a child's capacity to love. He approves of Aichhorn's well-known procedure with difficult cases. 'The child whose chronic aggressive reactions is partly the result of high degree of endowment with the aggressive drive or with hyperactivity and the child whose aggressive reactions have been liberated by cortical disease or injury present particular types of community problems.'

The first type needs ample play space and opportunity to use his muscles. He needs more scope for his activity than the ordinary child. In the case of brain disease or injury, no therapy will ameliorate the brain pathology, and an environment must be selected which will tolerate marked aggressive impulses. Pearson concludes with a few suggestions for prophylaxis which may be helpful in preventing the development of the chronic aggressive reaction.

MARJORIE R. LEONARD

Notes on the Mother Rôle in the Family Group. Frieda Fromm-Reichmann. Bulletin of the Menninger Clinic, IV, No. 5, 1940.

The author contrasts what she considers the family situation in Europe with that in America. In the former the father is said to have greater authority,

whereas in America the mother often has greater authority and tends to dominate.

According to this premise fundamentals of childhood development are reviewed with emphasis on the effect of authority. The author feels that in the case of the boy the erotic attraction to the mother who is in authority reinforces guilt feelings, a tendency to suppress emotion, and leads to feelings of insecurity and unsteadiness. The problem of sexual attraction to the parent of the opposite sex is much less important if the child feels generally secure in the love of his parents. 'The more the little boy feels that he can count on his mother's steady maternal acceptance, no matter what happens and no matter who else is around, the less intense and compulsive is his craving for other proofs of mother's love in the form of sexual wishes and phantasies with regard to her.'

Fromm-Reichmann discusses then the question 'to what extent is the mother's psychological rôle determined by maternal instincts and drives?' She feels that psychoanalysis 'has not yet dealt adequately with this problem', and that Freud's hypothesis stressing the feminine wish for a penis was the result of his 'patriarchal European tradition, culture and thinking'. The author feels that 'neurotic girls may regard menstruation as a repetition of the passive castration phantasies of their childhood. Depressive moods during menstruation in emotionally healthy girls are usually due to disappointment over the egg that leaves the body unimpregnated, not due to the memory-phantasy of a lost penis.' Her general conclusion is that this is an as yet unsolved problem.

The remainder of the paper is devoted to a discussion of 'the ideal, desirable functions and rôle of the mother in the modern family group', and in this section she cites some material to illustrate the dangerous influence of the undesirable domineering mother. She points out the difference between a real maternal love and a pseudo one expressed in the form of hypertenderness or oversolicitude. She recommends that the mother face her own problems, particularly problems of hostility which might involve the child. Furthermore, she recommends that the mother face frankly the fact of her own sexual feelings for the child when they occur.

CHARLES W. TIDD

The Problem of the Parent in Child Analysis. Agnes Bruce Greig. *Psychiatry*, III, No. 4, 1940.

In child analysis it is generally accepted that there is a strong conflict between the parent and the analyst, and that the analyst has the whole weight of the parent's anxiety and jealousy against him. This may cause difficulty due to an unresolved infantile anxiety which the parent-child situation revives in the analyst and which may be analyzed as the unresolved fear of the terrifying and omnipotent adult.

MARTIN GROTJAHN

Considerations of Methodology in Relation to the Psychology of Small Children. Jeanne Lampl-de Groot. *Int. J. Ps.*, XX, 1939, pp. 408-417.

Lampl-de Groot makes the criticism that sometimes two phenomena which are connected with each other genetically, are in analytic literature looked upon as identical. Pregenital conflicts which are reflected in the later specific *œdipus*

complex, are not yet an œdipus complex. A little boy, who at the age of two loved his mother in a passive-receptive way and behaved like a little girl, at the age of four turned into a little man who hated his father as his rival; only then was it justifiable to call it an œdipus complex. Lampl-de Groot warns against other 'adulto-morphisms'. Terms which imply differentiated states in later ages are sometimes reprojected and used for integrated early states. 'Superego' and 'projectedly misunderstood object' are not the same. Psychotics have regressed but that does not mean that infants are psychotics. Some analytic authors, it seems to Lampl-de Groot, did not understand the differentiation in development, but she thinks it justified to state of such authors: 'Just as preanalytic psychology denied that there was such a thing as the unconscious, so do they deny that there is such a thing as the dynamic development of the personality under the influence of external forces'.

OTTO FENICHEL

Temper Tantrums in Early Childhood in Their Relation to Internal Objects. Susan Isaacs. *Int. J. Ps.*, XXI, 1940, pp. 280-293.

In her introductory remarks, Miss Isaacs calls the temper tantrums of children 'manifestations of acute anxiety'. 'The child feels he is up against some force which he cannot control or alter, a person who will defeat all his wishes, rob him of all pleasure, restrict all his movements and reduce him to complete helplessness.' The decisive rôle in this respect is played by 'internal objects' according to Melanie Klein. The child 'is fighting a phantasy mother, rather than the real one with whom he actually struggles'. The analysis shows that this 'phantasy mother' is thought of as being in the child's interior. It is, according to Isaacs, the interest for the dangers inside the body which explains to us that the child in the temper tantrum does not pay attention to outer reality at all.

This conception is illustrated with two case histories, one of a child and one of an adult. The child developed temper tantrums after severe real traumata—loss of a loved nurse and the birth of a sibling—and Miss Isaacs is of the opinion that the tantrums were determined by fantasies of being persecuted by internal objects which fantasies were mobilized by the real events. The adult patient had, as a child, observed epileptic spells of his mother. Unconsciously he not only thought that those spells were due to his own sadism, but they also are said to be felt by him as a proof of the effectiveness of his dreadful fantasies about internal objects.

Miss Isaacs summarizes her standpoint as follows: 'The child's screaming, struggling and rigidity in the tantrum represent his attacking and being attacked by his enemies within and without, against whom he must call up every resource of body and mind, since his life depends upon his getting them once again under his control.'

OTTO FENICHEL

A Special Mechanism in a Schizoid Boy. Susan Isaacs. *Int. J. Ps.*, XX, 1939, pp. 333-339.

The 'special mechanism' Isaacs describes in a schizoid boy, is the acting out of metaphors, comparable to the translation of metaphors and idioms into pictures

in dreams. This phenomenon occurs when a verbal expression secondarily becomes again the object of the primary process. This occurs in dreams as well as in schizophrenia when attempts at restitution catch verbal representations of objects instead of the objects themselves.

When the patient who unconsciously hates his grandmother, but at the same time has tender feelings towards her, expresses his ambivalence in attempts to throw a cat with a parachute out of the window, such behavior seems to the reviewer indeed not only an acting out of the idioms of 'throwing her out' and 'letting her down gently', but also, without metaphors, the expression of the conflict between the impulses to kill her and to spare her.

Especially interesting are some acts of magical behavior of the patient such as certain motions of the fingers, the unconscious meaning of which is, 'the other people are only my puppets'. This warded off the feeling that he himself is the other people's puppet. Other magical behavior patterns of the patient are less clear and are interpreted by the author according to Melanie Klein's points of view.

OTTO FENICHEL

Behavior Characteristics of Schizophrenic Children. Charles Bradley and Margaret Bowen. *The Psychiatric Quarterly*, XV, 1941, pp. 296-315.

The authors attempt to clarify the diagnosis of schizophrenia in childhood by comparing the behavior of four schizophrenic and ten schizoid patients with the behavior of 124 miscellaneous problem children. They find that the schizoid and schizophrenic group is characterized by eight behavior traits which were seldom prominent among the other children. In the order of importance these traits are: seclusiveness, bizarre behavior, regressive nature of personal interests, sensitivity to criticism, irritability, daydreaming, diminution of interests and physical inactivity. No history material is given on any case, the entire emphasis being on the patient's behavior while in a psychiatric hospital. The case material is so scanty that it leaves the diagnosis open to question in several instances and the paper is written from a purely descriptive point of view.

ADRIAN H. VAN DER VEER

A Comparative Study of Thinking in Schizophrenic Children and in Children of Preschool Age. Louise Despert. *Amer. J. of Psychiatry*, XCVII, 1940, pp. 189-213.

The author reports experimental observations of nineteen normal preschool children in their spontaneous expression of fantasy in play, compared with the productions of schizophrenic children, two girls of eight, and one girl of thirteen. This comparison is meant to answer the question whether schizophrenic thinking represents a reversal to earlier levels of development in child thinking. The author's answer to this question is negative. Normal children usually react to questions regarding their fantasies with denials of their reality character, calling them pretense or make-believe. In a smaller proportion they answer with evasion; still less frequently with reiteration and apparent belief in the reality character of their productions. In the last group, the fantasies

are emotionally reinforced. One of these emotionally tense children is immature and unsatisfactory in social adjustment. Schizophrenics rebel against the questioning physician with denials of reality, assumptions of magic power in the sense of wish fulfilment or anxious expectation of being overpowered, paranoid projection, incoherence and inadequacy of emotion and content; reality value is attributed to hallucinations and delusional falsifications of reality. From this comparison the author draws the conclusion that those fantasy productions of normal children 'which most closely resemble those found in the schizophrenic are dependent upon emotional factors and not upon characteristics inherent in child thinking'.

The psychoanalyst may add that the child's play, like the thinking processes of the adult, represents a testing out approach to reality, libido being shifted from desirable objects of fantasy to reality objects. Emotional strain may inhibit this progressive conquest of reality and cause the child in a regressive way to stick more or less tenaciously to the products of his fantasy. The schizophrenic children of this study are obviously in a state of emotional upheaval and open rebellion against their environment and against reality. The difference seems to lie not so much in the thinking processes as in the emotional attitude towards them. The schizophrenic child clings with emotional emphasis to fantasy objects that the normal child handles playfully. For the schizophrenic child the fantasy object substitutes the denied and rejected reality object that the normal child reaches out for.

E. WEIGERT-VOWINCKEL

Observations on Sioux Education. Erik Homburger Erikson. *The J. of Psychology*, VII, 1939, pp. 101-156.

The Sioux Indians were buffalo hunters accustomed to an abundance of game which became a legend overnight. They then became dependent upon a feeding Government. When the buffalo died, the Sioux died. They found themselves as helpless in their situation as children are in the hands of frustrating parents with whom they refuse to identify themselves. They continue to dream their dreams of restoration. The idea of storage is strange to them and money distasteful. The white teachers complain 'the Indian parents not only allow their children to masturbate, they teach them to masturbate'. And this is answered by the Indians 'the whites not only let their babies cry, but they teach them to cry'. This signifies the correspondence between prejudices and group virtues.

The white teacher has never really been accepted by the Indians and does not represent in any way the parents' philosophy for their children. Indian children may live for years without open rebellion or any sign of inner conflict between two standards which are further apart than are those of any two generations or two classes in our culture. They may show passive resistance; they do not show neurotic tension or 'bad conscience'. Every Indian child has the right to call all sisters of his mother 'mother' and all brothers of his father 'father'. When he feels frustrated in his family he just takes a leave of absence. The basic psychological problem of Indian education by whites is the strange inner security and inner personal harmony of the Indian who submits but does

not surrender. The sudden change from the strict Indian family into the freer atmosphere of the American boarding house results often in sexual delinquency of the Indian girl.

The Indian baby is nursed whenever he wants to and the father is not allowed to interfere with the baby's privilege. If the child is nursed for three to five years no sexual intercourse between the parents takes place. There is no systematic weaning and it is probable that the child finally succeeds in weaning its mother. The only thing which the mother resents is being bitten by the baby. Indian parents seldom threaten their children, and then mostly with the same formula: 'The white man will come and get you.'

Bowel and bladder training the Indian children are allowed to acquire by themselves in gradual compliance with the rules of modesty. Strict sexual taboos are introduced when the sixth year is reached. Brothers and sisters are then no longer allowed to speak to one another and girls are confined to play with girls. A dangerous increase of ambivalence is avoided because there are many mothers and many fathers in the Indian family.

Contrary to the educational system of white men who allow their children only after mechanical socialization to develop into individualists, the Indian child is allowed to be an individualist while quite young. This anachronistic system of child training is the source of inner peace under desperate communal conditions.

MARTIN GROTJAHN

Excerpts from a Mental Hygienic Reader. Stella Coffman and Douglas W. Orr.
Bulletin of the Menninger Clinic, IV, No. 1, 1940.

The authors give a detailed account of the procedure in an experimental hygiene class for children between the ages of seven and fifteen. A set-up was established in which the children as a class were encouraged to discuss various elements of individual behavior. The authors feel that such open discussion makes children feel more secure. 'In discussing some of the mechanisms of behavior the child learns to understand himself and others better'; furthermore, the authors hold that when such opinions are 'freely expressed in the presence of an understanding and sympathetic adult they have a therapeutic value in relieving a child's sense of guilt and in helping him to lose his fear of adults'.

CHARLES W. TIDD

Behavior Problems in Children from the Homes of Followers of Father Divine.
Lauretta Bender and M. A. Spalding. J. of Nerv. and Ment. Dis., XCI,
1940, pp. 460-472.

Historics of seven children, aged five to twelve, are presented. The children's symptoms of neurosis and delinquency are described in relationship to the parents' adherence to Father Divine's religion. Since the tenets of this religion make a normal family life impossible, the result of the parents' adherence to it is a peculiar home situation which provides a unique opportunity for studying the relation between home and maladjustment of children.

K. R. EISSLER

Behavior Problems in Negro Children. Laurretta Bender. *Psychiatry*, II, 1939, pp. 213-228.

Economic and social conditions rather than racial difference account for deviations in the behavior of negro children as compared to whites in the same community. Specific reaction patterns seem to occur in the negro child in the form of blocking, mutism, catalepsy and negativism and a facile capacity to fall asleep. A combination of warm interhuman relationships and poorly crystallized family constellations accounts for some of their behavior problems.

GÉZA RÓHEIM

Study of Environmental Factors in the Adiposo-Genital Syndrome in Boys. Arnoldo Rascovsky, J. Salzman, and collaborators. *Archivos Argentinos de Pediatría*, año XI, tomo XIV, No. 6, p. 521.

The authors make a detailed study of all factors involved in the prepuberal adiposo-genital syndrome in boys. The first two communications deal with environmental factors. The following investigations were made in each case:

1. Environmental and geneologic history.
2. Psychological investigation.
3. Rorschach psychogram and other mental tests.
4. General somatic examination.
5. Photographic study.
6. X-ray study (hand, sella turcica).
7. Dento-Maxilo-Facial examination.
8. Phoniatic examination.
9. Ophthalmologic examination.
10. Laboratory tests.

The authors analyze especially the position of the patients within the family constellation and find that each of these boys is either an only son, an eldest son, or a youngest son. These three groups include 99 of 100 cases. The exception had a homosexual relation with his elder brother and became sick after this relation had been interrupted.

All cases showed a high degree of family fixation—strong affections from the parents, and very few relations outside of the family. Their sexuality was hyperstimulated, but at the same time deprived of any adequate discharge. Often there were conspicuous pregenital, especially oral fixations; anal fixations also often were obvious, whereas genitality was repressed. The personalities of the parents or their relationship to each other had often pathological trends; especially the father lacked those prerequisites which are necessary for the son's development of a normal superego; often the parents' marriage was an unhappy one.

Interesting is the reference to a histological analogue of the freudian conception of the latency period. Ancel and Foncin have demonstrated that the testicular evolution in boys has two marked periods, the one extending from the intrauterine state up to the age of about five and a half, the second beginning with puberty. In both periods there are gonocytes and vegetative cells in the seminiferous ducts, and Leydig's cells in the intersticium. At the age of

five and a half, the testicle suffers an involution in which Leydig's cells, gonocytes and vegetative cells disappear, giving place to spermatogenic cells and Sertoli cells.

ANGEL GARMA

Remarks on the Popularity of Mickey Mouse. Fritz Moellenhoff. *American Imago*, I, No. 3, 1940.

For children the Mickey Mouse films contain the gratification of presenting a daydream playfully substituted by a series of pictures in which smallness is victorious. The adult onlooker demonstrates an unusually uninhibited process of identification. Mickey Mouse is ill adapted to physical expressions of love. He represents a lively though neutral sex. The conscious or unconscious jealousy for the person with whom we try to identify does not enter in the case of Mickey Mouse. The films represent a child's world of visions and fantasies and they unfold a mechanized fairy tale. They resolutely follow the pleasure principle. Mickey Mouse is a happy child and the satisfaction of his desire is still his supreme law. A unique magic restoration regularly takes place. Reality and fantasy are no longer opposed. The laws of gravity and logic are denied. Very important is the feature of all Mickey Mouse films that they ridicule the machine age. Symbolically Mickey Mouse could be called a desexualized phallus. The audience feels that, and although Mickey remains a mouse and a phallus he does not stir up wishes which have to be suppressed; consequently he does not arouse anxiety.

MARTIN GROTJAHN

NOTES

The third meeting of the CALIFORNIAN PSYCHOANALYSTS was held in Los Angeles in March, 1941. The following papers were presented: Short Psychoanalytic Psychotherapy, Its Possibilities and Its Limitations by Dr. Berliner; A Specific Revenge Type of the Female Castration Complex by Mrs. Munk; About the Fascinating Effect of the Narcissistic Personality by Mrs. Olden; The Ego Defenses in Certain Organic Neuroses by Dr. Kananin; A Comparative Study of the Rôle of Superego in Organic Disease, Psychosis and Neurotic Criminality by Dr. Simmel; Some Comments on Convulsive Phenomena by Dr. Macfarlane; Symposium: The Relation of the Ego Attitudes to the Instincts.

Family Morale in a World at War is the general theme of the CHILD STUDY ASSOCIATION OF AMERICA's Annual Institute, November 14th and 15th, at the Hotel Commodore, New York City. The Institute will discuss such aspects of the topic as The Home Front and the Defense Program, Children in a Threatened World, Family Morale and American Unity, and Youth Attitudes Towards the World Crisis. The following are some who have already agreed to take part in the Institute: General Lewis B. Hershey, Governor Paul V. McNutt, Dr. Martha Eliot of the Children's Bureau, Dr. James Plant, Lawrence K. Frank, W. Carson Ryan, Mark A. McCloskey and Eduard C. Lindeman. The complete program will be announced in the early fall. Further details may be obtained from the Child Study Association, 221 West 57th Street, New York City.

THE BOARD OF EDUCATION OF THE CITY OF NEW YORK announces a Decennial Celebration to be given by the Bureau of Child Guidance at the Waldorf-Astoria Hotel, New York City, on October 18, 1941. The panel on the General Field of Guidance will be led by Dr. Frank J. O'Brien, former Director of the Bureau and recently appointed Associate Superintendent of Schools. Dr. Eugene C. Ciccarelli, Psychiatrist, with Dr. Morris Krugman, Chief Psychologist, and others will conduct a symposium on Learning Difficulties. Miss Shirley Leonard, Chief Psychiatric Social Worker, will lead a panel on the Adolescent; Dr. Emanuel Klein on the Problem Child; Mr. Samuel Goldberg on the Exceptional Child; Dr. Max Winsor on the Young Delinquent.

